

**PREA AUDIT REPORT**     Interim     Final  
**ADULT PRISONS & JAILS**

**Date of report:** December 8, 2017

<b>Auditor Information</b>			
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<b>Telephone number:</b> 540-903-6457			
<b>Date of facility visit:</b> July 24-26, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Nevada Southern Detention Center			
<b>Facility physical address:</b> 2190 E. Mesquite Ave. Pahrump NV 89060			
<b>Facility mailing address:</b> <i>(if different from above)</i> Click here to enter text.			
<b>Facility telephone number:</b> 775-751-4500			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Janice Killian			
<b>Number of staff assigned to the facility in the last 12 months:</b> 205			
<b>Designed facility capacity:</b> 1065			
<b>Current population of facility:</b> 779			
<b>Facility security levels/inmate custody levels:</b> Maximum Security---Low , Moderate, High			
<b>Age range of the population:</b> 18-70			
<b>Name of PREA Compliance Manager:</b> Juan Ibarra		<b>Title:</b> Assistant. Warden	
<b>Email address:</b> Juan.ibarra@cca.com		<b>Telephone number:</b> 775-751-4500x14502	
<b>Agency Information</b>			
<b>Name of agency:</b> CoreCivic			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Click here to enter text.			
<b>Physical address:</b> 10 Burton Hills Blvd., Nashville, TN 37215			
<b>Mailing address:</b> <i>(if different from above)</i> Click here to enter text.			
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<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Damon Hininger		<b>Title:</b> President and Chief Executive Officer	
<b>Email address:</b> Damon.hininger@cca.com		<b>Telephone number:</b> 615-263-6915	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> ERIC PIERSON		<b>Title:</b> Senior Director PREA Programs and Compliance	
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## AUDIT FINDINGS

### NARRATIVE

The PREA audit of the Nevada Southern Detention Center was conducted on July 24- 26, 2017 by David Haasenritter. Nevada Southern Detention Center is operated by CoreCivic, previously known as Corrections Corporation of America (CCA) and some documents used in this audit and report were still titled as CCA. The audit notice was posted on June 12, 2017. Approximately three weeks prior to the audit, the auditor received the PREA questionnaire and policies, procedures and supporting documentation related to each standard for review on a thumb drive. The documents and questionnaire were organized, highlighted, and tabbed. The auditor received two letters from one detainee who was not present during the audit; and received a copy of a letter sent to Office of the Inspector General from another detainee who was interviewed during the audit. The night before the audit the institution provided a roster of all detainees housed at the institution; lists of detainees for specific categories to be interviewed; and a list of all staff by duty position and shifts that were used to identify detainees and staff to be interviewed (random and specific category).

The auditor contacted Just Detention International (JDI) in reference any information previously submitted by detainees at the Nevada Southern Detention Center and reviewed the CoreCivic website prior to the audit. The website is very informative. CoreCivic PREA page lists: general information on PREA; agency zero tolerance policy; how to report; information on investigations; and where questions and inquiries can be forwarded to (PREA Coordinator phone and mailing address). It also has a number of links to include: PREA standards; CoreCivic PREA policies; CoreCivic 2013, 2014, 2015, 2016 PREA Report; and CoreCivic Institution PREA information. The CoreCivic Institution PREA information link lists each CoreCivic institution with information on that institution's PREA Compliance Manager; third party reporting methods; PREA policy; PREA audit dates; and the last PREA audit report.

Following the entrance meeting with staff, the auditor toured the entire institution on July 24, 2017, and went back to certain areas in the institution on July 25 - 26, 2017. While touring, random detainees and staff were informally interviewed and questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and detainees informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment and/or retaliation for reporting. During the tour the auditor reviewed staffing; logs; physical plant; sight lines; camera coverage; tested the detainee phone system for reporting allegations and for emotional support services; and institution operations

Following the initial tour, the auditor began the formal interviews, review of investigations, checking of cameras, and random checks of detainee, personnel, medical, and training records. Some of the review of staff and inmate records were scanned for review after the on-site audit. The auditor conducted 41 staff interviews (16 random, 25 specialized). The CoreCivic PREA Coordinator and Agency head representative was interviewed prior to the audit. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation.

A total of 35 detainees were formally interviewed (does not count two detainees who refused): 35 random interviews and 18 specialized interviews (LGB (3); TI (4), who disclosed sexual victimization during screening (2); who reported sexual abuse or harassment while confined (1), limited English (6); and disabled (2)). Majority of the detainees interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmate's handbooks) in a language and formats they understand outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; and reported staff of the opposite gender announced when entering a housing area. All inmates who were asked stated they felt safe at the institution. The auditors found the inmates aware of PREA. One detainee provided the auditor a note the day after she was interviewed, the auditor went back to see that detainee.

At approximately 10 p.m. on the first night of the audit, the auditor observed a shipment of detainees to Nevada Southern Detention Center go through the intake process. The 29 detainees were processed through intake very professionally. The process included providing detainees information about PREA verbally and in writing (PREA brochure and detainee handbook); and conducting PREA screens.

The auditor reviewed the 11 allegations of a sexual abuse and sexual harassment in the last 12 months at Nevada Southern Detention Center. There were seven (7) detainee-detainee allegations: four (4) detainee-detainee sexual harassment unsubstantiated; two (2) detainee-detainee sexual abuse unfounded; and one (1) detainee-detainee sexual abuses unsubstantiated. There were four (4) staff-detainee allegations: one (1) staff-detainee sexual harassment unsubstantiated; two (2) staff-detainee sexual abuses unsubstantiated; and one (1) staff-detainee sexual abuse unfounded.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the institution a final finding, the auditor did provide a preliminary status of his findings. The auditor thanked CoreCivic, and Nevada Southern Detention Center staff for their hard work and commitment to the Prison Rape Elimination Act. During the interim report writing and corrective action period, the auditor reviewed additional documents, modified forms, and conducted staff interviews.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

The Nevada Southern Detention Center is located at 2190 E. Mesquite Ave, Pahrump, Nevada which is approximately 75 miles northwest of downtown Las Vegas, Nevada, in a rural farmland area of Nye County. Corrections Corporation of America designed, built and operates this single story, rectangular, 1064-bed facility which houses Federal detainees for the United States Marshal Service (USMS) and detainees in transit for the Federal Bureau of Prisons. The population on the first day of the audit was 779. The facility houses both female and male detainees who are awaiting trial, sentencing or are waiting to be transported to a long-term facility in the Federal Bureau of Prisons system.

There are eight dormitory-style housing units and four cell block units with two-man cells. One dormitory houses females with 88 general population beds and an eight-bed segregation unit. The other seven dormitory units three of the cell block housing units house general population males. The other cell block housing unit is a male segregation unit.

The facility includes a central kitchen, laundry, vehicle sally port, outside recreation areas adjacent to each housing unit, non-contact visitation area, video court rooms, administrative offices, maintenance shop, library, chapel, medical/dental/mental health department, central control and warehouse. Detainees have access to religious activities, legal services, library services, recreational activities, as well as basic medical and dental care.

Security at the facility is maintained, in part, by two 13-foot perimeter fences. The outside fence is laced with razor ribbon while the inside is a non-lethal stun fence. Perimeter security includes a mobile patrol unit monitoring the perimeter on a 24/7 basis. Security measures include 135 cameras in total (inside and outside).

The CoreCivic mission is “advancing corrections through innovative results that benefit and protect all we serve.” The mission Nevada Southern Detention Center states that “through the highest standards of professionalism, we will provide excellence in corrections to our community and government partners. We will cultivate an environment of communication and teamwork. We are Nevada Southern!”

## **SUMMARY OF AUDIT FINDINGS**

On July 24 - 26, 2017, the on-site visit was completed. Within a week of the audit being completed, the auditor provided a list of not met standards, and standards requiring additional information. During the 45-day interim report writing period, five (5) standards were identified as requiring corrective action. On October 16, 2017, the auditor found Nevada Southern Detention Center compliant with all PREA standards. The final results of the Nevada Southern Detention Center PREA audit is listed below:

Number of standards exceeded: 4

Number of standards met: 36

Number of standards not met: 0

Number of standards not applicable: 3

**Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

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

CoreCivic has a base CCA Policy 14-2 Sexual Abuse Prevention and Response, that is the is the written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment which outlines the agency’s approach to preventing, detecting and responding to such conduct. Each facility has a CCA Policy 14-2 Sexual Abuse Prevention and Response modified for its facility based on client guidance and requirements and facility specific procedures. CCA Policy 14-2 Sexual Abuse Prevention and Response - Nevada Southern Detention Center is the written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment which outlines the Nevada Southern Detention Center approach to preventing, detecting and responding to such conduct. For the remainder of this report, CCA Policy 14-2 Sexual Abuse Prevention and Response - Nevada Southern Detention Center will be referred to CCA Policy 14-2.

CoreCivic employs an upper-level, agency-wide PREA Coordinator and a PREA Compliance Manager. Mr. Eric Pierson is the PREA Coordinator, and a certified PREA auditor. The CoreCivic organization chart demonstrates Mr. Pierson is in a position of authority. He is knowledgeable of PREA standards and has the authority to develop, implement, and oversee CoreCivic PREA program. He indirectly supervises approximately 55 compliance managers.

Mr. Juan Ibarra serves as the Associate Warden and Nevada Southern Detention Center PREA Compliance Manager. He was knowledgeable of PREA standards, and was actively involved in PREA activities. He claimed to have enough time to perform his PREA duties. He coordinates and conducts training, provides information at staff calls, and coordinates with facility leadership. Staff and detainees knew he was the PREA Compliance Manager based on his interaction with the detainee population. Review of Nevada Southern Detention Center organizational chart and interviews demonstrated he had the authority to coordinate the facility’s efforts to comply with PREA.

Warden Janice Killian was very knowledgeable on PREA.

**Standard 115.12 Contracting with other entities for the confinement of 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)

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X Not Applicable

CoreCivic is a private provider and does not contract with other agencies for the confinement of detainees; therefore, this standard is not applicable

### Standard 115.13 Supervision and monitoring

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

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CoreCivic ensures each institution it operates develops document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect detainees against sexual abuse by monitoring and reviewing the staffing plans. CCA Policy 14-2 establishes procedures to develop and monitor staffing plans uses the criteria found in standard 115.13 (a) to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution's physical plant (including "blind-spots" or areas where staff or detainees may be isolated); composition of the detainee population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan. Nevada Southern Detention Center had approximately 134 cameras located the facility. Recordings are stored depending on the camera zone. The staffing plan is reviewed annually by the Warden and PREA Compliance Manager at the institution; and CoreCivic PREA Coordinator and Vice President for Operations. The auditor reviewed the 2016 annual review.

CCA Policy 14-2 requires the staffing plan be complied with and when it does not the institution shall document and justify all deviations from the plan. Through review of the staffing plan and shift documents, interview of staff and the leadership, it was determined Nevada Southern Detention Center had deviations from the staffing plan in the last 12 months. Nevada Southern Detention Center uses overtime to ensure the staffing plan is complied with, but there were instances due to emergency medical transports, medical watch at a hospital, and staff emergency leave created deviations till staff could be contacted and personnel fill the posts. During the audit, the auditor observed senior staff on shift calling for personnel for overtime duty due to a medical transport that occurred at the end of a shift. They were also proactive in alerting staff for overtime for the next shift prior to coming on shift. When deviations occur, they are properly documented.

The CCA Policy 14-2 requires unannounced rounds by supervisors and prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Unannounced rounds by intermediate-level or higher-level supervisors are documented and are done randomly on all shifts. The auditor reviewed logs prior to the audit, and logs on site. Staff and detainee interviews and the logs confirmed the unannounced rounds by supervisors are done on all shifts and staff were not alerting other staff the unannounced rounds were being conducted.

### Standard 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)

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X Not Applicable

Nevada Southern Detention Center is an adult male and female facility and does not house youthful detainees; therefore, this standard is not applicable.

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

CCA Policy 14-2 states the institution shall enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks; and requires staff of the opposite gender to announce their presence when entering a detainee housing unit. It provides guidance how opposite gender staff is to announce their presence when entering a detainee housing unit. All areas that detainees shower, perform bodily functions and change clothing are adequately blocked from view of non-medical staff of the opposite gender viewing their buttocks, breasts (female detainees), or genitalia, while still maintaining observation to protect detainees and staff from sexual abuse. Observation throughout the site visit and review of all the Pelco camera monitors demonstrated opposite gender staff could not view detainee's buttocks, breasts (female detainees), or genitalia. Staff of the opposite sex announces themselves when they enter the housing units and reminders of this practice are posted on the entry doors of all housing units. Detainees interviewed confirmed that this practice is being adhered to and indicated that they feel they have privacy when staff of the opposite sex is in their housing unit.

CCA Policy 9-5 Searches of Inmates/Residents and Various Location, outlines institutions shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances; and shall document all cross-gender strip searches and cross-gender visual body cavity searches. Based on documents reviewed and interviews of staff and detainees, Nevada Southern Detention Center has not conducted cross-gender strip searches or cross-gender visual body cavity searches in the last 12 months.

CCA Policy 14-2, states institutions shall not search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee's genital status; and if the detainee's genital status is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. Through interviews of staff and detainees it was determined staff do not search or physically examine a transgender or intersex detainees for the sole purpose of determining the detainee's genital status, and only medical staff if needed would make that determination.

Review of training records, lesson plans, and interviews of staff demonstrated staff had been trained to conduct how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The auditor found through interviews that staff did not know the definition of a transgender detainee and did not know how to conduct cross-gender searches of transgender detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs (115.15 (f)). Interviews of transgender detainees confirmed some staff use palms of their hands to do pat search of transgender detainees, one of which claimed to have been groped. One transgender detainee said the pat searches were professional despite the staff using the palms of their hands. The Corrective Action Plan was to provide staff refresher training on the definition of transgender; and how to conduct searches of transgender and intersex detainees, in a professional and respectful manner, and in the least intrusive manner possible. The auditor should be sent a copy of the training material and staff training rosters. The auditor will then conduct some telephone interviews. Nevada Southern Detention Center conducted training of staff on the definition of transgender and transgender searches from July 31 – August 16. The auditor was provided documents demonstrating the training was conducted. On October 13 the auditor conducted telephonic interviews of six staff, those interviewed could define transgender and explain how to conduct a transgender search. On October 16 the auditor found Nevada Southern Detention Center compliant with the standard.

There is female staff on all shifts, and female staff conduct all female searches. Based on interviews of staff and detainees, Nevada Southern Detention Center does not restrict female detainees access to regularly available programming due to lack of female staff to do pat searches.

#### **Standard 115.16 Inmates with disabilities and inmates who are limited English proficient**

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

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

CoreCivic and Nevada Southern Detention Center takes appropriate steps to ensure that detainees with disabilities and detainees that are limited English proficient have an equal opportunity to participate and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and harassment. Review of Policy 14-2, Language Line Contract, the lesson plan for staff training on Safety and Security Issues, PREA posters, the Detainee Handbook and the brochure 14-2AA, Preventing Sexual Abuse and Misconduct", and interviews were used to verify compliance of this standard. PREA posters, the Detainee Handbook and the brochure 14-2AA, Preventing Sexual Abuse and Misconduct", are given to detainees at orientation, and any other written material they receive are provided in both English and Spanish. The Language Line service is utilized to convey verbal information to detainees who are non-English speaking. The auditor reviewed the Language Line bills for 2017. The detention center also has staff who speak foreign languages, mainly Spanish. Six Spanish speaking detainees interviewed reported they have received all PREA information provided to them in Spanish. They had a good knowledge of PREA and had been provided PREA information in formats that allowed them equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The auditor used staff as interpreters, the staff translator was very professional, and it was obvious the detainees were comfortable with the staff translator. The auditor also interviewed a deaf and partially blind detainee, who was provided PREA information, the partially blind detainee was read the information. TTD is available for hearing impaired detainees. Both had basic knowledge of PREA, zero tolerance and how to report. The agency prohibits the use of detainee interpreters, detainee readers or other types of detainee assistants.

#### **Standard 115.17 Hiring and promotion decisions**

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

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CCA Policy 14-2 outlines policy and procedures to ensure staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; 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 been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. CCA Policy 14-2 requires the institution to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with



inmates. Prior to the audit, the auditor reviewed an employee and contractor application packet. During the audit reviewed 32 employees and two (2) contractor background checks; and two (2) employee application packets. Through review of personnel records and staff interviews it was determined Nevada Southern Detention Center staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; 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 been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. The documents and interviews also demonstrated CoreCivic and the facility considers incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

CCA Policy 14-2 requires background checks for staff and contractors; and 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, and updating background checks of employees and contractors every five years. Interviews of Human Resource staff and a review of an employee application packet demonstrated contact with prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Prior to the audit one background check of an employee and contractor was reviewed. During the audit the auditor reviewed two employee application packets and two contractor packet that demonstrated background checks were done prior to employment. The auditor also reviewed 32 random staff and two (2) contractor background checks, spreadsheet of all background checks and found all were less than five years old.

CCA Policy 3-20-2 Career Opportunities states shall ask all applicants and employees who may have contact with detainees directly about previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees; and imposes upon employees a continuing affirmative duty to disclose any such misconduct. CCA policies 3-20-2 and 14-2 requires information be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Prior to the audit received one CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment document each for applicant and staff promotion demonstrating they addressed previous sexual misconduct as described in PREA standard 115.17 (a). The auditor did not receive any annual CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment in any interviews or written self-evaluations conducted as part of reviews of current employees. During the audit reviewed two promotions and two applicant packets that demonstrated applicants and employees who may have contact with detainees directly are asked about previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or interviews for hiring or promotions; and imposes upon employees a continuing affirmative duty to disclose any such misconduct. During the audit requested but did not receive any annual CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment for staff interviewed. Nevada Southern Detention Center had not been completing CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment in written self-evaluations conducted as part of reviews of current employees (115.17(f)). Corrective Action Plan: Develop a system to ensure Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment is completed during annual evaluation or training. The auditor Nevada Southern Detention Center PREA Compliance Manager and HR staff discussed with the auditor the system that would be used to monitor to ensure CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment are signed by the employee annually. Nevada Southern Detention Center immediately had every employee sign a CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment. Nevada Southern Detention Center decided to have all employees sign the CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment during annual training. The auditor reviewed 17 CCA Form 14-2H Self Declaration of Sexual Abuse/Sexual Harassment. The auditor found the Nevada Southern Detention Center compliant with the standard on September 20, 2017.

CCA Policy 14-2 states material omissions regarding sexual misconduct, or the provision of materially false information, shall be grounds for termination.

### **Standard 115.18 Upgrades to facilities and technologies**

- 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)

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### **corrective actions taken by the facility.**

Through review of CCA policies 14-2 and 7-1 Record Drawing and Alterations/Additions, and interviews of CoreCivic Agency Head representative, PREA Coordinator, PREA Compliance Manager, and Warden it was determined that CoreCivic considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse. During the review of the staffing plan, the video monitoring system is also reviewed to ensure coverage enhances the ability to protect detainees from sexual abuse. CCA Policy 14-2.4, states that when designing, acquiring, expanding, modifying facilities; or installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect detainees from sexual abuse. Considerations are documented using CCA Form 7-1B PREA Physical Plant Considerations to include document the project had no PREA considerations. The auditor reviewed two 2016 CCA Form 7-1B, one modification to the facility recommended adding a convex mirror to provide full visual of the room from the officer post. The other CCA Form 7-1B documented the modification had no PREA considerations. Nevada Southern Detention Center has 135 cameras throughout the facility. The cameras are monitored and are recorded. Mirrors have been added for blind spots during the audit cycle.

Based on interviews, documentation, and observation in numerous PREA audits, CoreCivic seriously reviews its designs and technology, making PREA modifications as appropriate. It is not just a paperwork drill, modifications have been observed implemented at various CoreCivic facilities. Nevada Southern Detention Center Warden interview, annual staffing reviews (includes electronic monitoring) and CCA Form 7-1B demonstrates at the facility level they always consider PREA requirements and considerations.

### **Standard 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)

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CCA Policy 14-2 outline evidence protocols for administrative proceedings and criminal prosecutions; requirements for forensic medical exams; and when requested by the victim, a victim advocate to accompany and support the victim through the forensic examination, investigatory interviews, emotional support, crisis intervention, information, and referrals. The protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. Staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. During interviews the Nevada Southern Detention Facility investigator demonstrated he had a good understanding of the investigative procedures and responsibilities and evidence protocols.

The Nevada Southern Detention Facility investigator is responsible for conducting administrative investigations and the Nye County Sheriff's Office is responsible for conducting criminal sexual abuse investigations. There is a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions. The protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. Majority of the staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when a detainee alleged sexual abuse. The investigator had a good understanding of the investigative procedures and responsibilities and evidence protocols.

CCA Policy 14-2 requires all victims of sexual abuse are provided access to forensic medical examinations whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate, by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. The agency offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). Nevada Southern Detention Center victims of sexual abuse would have access to forensic medical examinations. Detainees are initially sent to Desert View Hospital and offered a forensic exam at University Medical Center or Sunrise Hospital, both located in Las Vegas, NV. There were no forensic exams in the last 12 months.

Nevada Southern Detention Center makes available to the victim a victim advocate and victim advocate services from a rape crisis center. A  
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Memorandum of Understanding (MOU) with the Community Action Against Rape DBA, the Rape Crisis Center (Las Vegas, NV) provides victim advocate through the process and emotional support for victims of sexual abuse by phone. While on-site the auditor used the inmate phone system to contact the Community Action Against Rape DBA, the Rape Crisis Center.

Nevada Southern Detention Center requested Nye County Sheriff's Office to follow PREA standards 115.21, 115.22, and 115.71, and the agreement is captured in the MOU between Nevada Southern Detention Center and Nye County Sheriff's Office.

**Standard 115.22 Policies to ensure referrals of allegations for investigations**

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

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

CCA Policy 14-2 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, that all allegations of sexual abuse or sexual harassment are referred for investigation by the appropriate authority. CCA Policy 14-2 and the MOU with Nye County Sheriff's Office describe the responsibilities for each agency. CoreCivic's policy regarding referral of allegations of sexual abuse and sexual harassment for criminal investigation are available on the CoreCivic website. Through a review of the investigative file and interviews of the Warden and investigative staff; it was determined the Nevada Southern Detention Center ensures that an administrative and/or a criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Referrals of allegations are first investigated by the institution. One case was referred to Nye County Sheriff's Office, but the incident was considered consensual and not prosecuted.

The auditor reviewed the 11 allegations of a sexual abuse and sexual harassment in the last 12 months at Nevada Southern Detention Center. There were seven (7) detainee-detainee allegations: four (4) detainee-detainee sexual harassment unsubstantiated; two (2) detainee-detainee sexual abuse unfounded; and one (1) detainee-detainee sexual abuses unsubstantiated. There were four (4) staff-detainee allegations: one (1) staff-detainee sexual harassment unsubstantiated; two (2) staff-detainee sexual abuses unsubstantiated; and one (1) staff-detainee sexual abuse unfounded.

**Standard 115.31 Employee training**

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

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

CCA Policy 14-2 addresses PREA staff training requirements. Nevada Southern Detention Center employees receive PREA training annually through scheduled training, and staff recall meetings. The CoreCivic PREA training lesson plan was reviewed and verified the training covered: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual

abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; detainees' right to be free from sexual abuse and sexual harassment; the right of detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with detainees; how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The training is tailored to working with both male and female detainees. Some training has been through e-learning online and includes a test that requires a score of 80 percent to pass. Employees acknowledge they understood the training. Staff interviewed were well versed in the CoreCivic zero tolerance policy; their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation. Prior to the audit documents demonstrating two staff acknowledged they understood the training and one understood CCA Policy 14-2 was provided and reviewed. During the audit, the auditor randomly reviewed staff training records, all staff members had been trained and there was documentation the staff signed stating they understood the training received.

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

CCA 14-2 and the PREA training curriculum outline training requirements for volunteers and contractors who have contact with detainees. Prior to the audit the PREA slides; volunteer training sign in roster; contractor sign in roster; and one contractor and one volunteer training records and memorandum stating they understood the training was provided. Contractors receive the same annual training a staff. The agency maintains documentation confirming that volunteers and contractors understand the training they have received. Interviews of the contractors and volunteers demonstrated their knowledge of PREA, their responsibilities, how and who to report to, and the agency zero tolerance policy.

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

CCA Policy 14-2 requires that all detainees receive PREA information upon arrival and PREA education as part of the Admission and Orientation program. The auditor requested training documents on 35 detainees interviewed. Based on observation, review of documents, and staff and detainee interviews demonstrated detainees receive a PREA information brochure and detainee handbook on their arrival date; and comprehensive education within 30 days of arrival. At approximately 10 p.m. on the first night of the audit, the auditor observed a shipment of detainees to Nevada Southern Detention Center go through the intake process. The 29 detainees were processed through intake

very professionally. The process included providing detainees information about PREA verbally and in writing (PREA brochure and detainee handbook). Monthly Town Hall meetings are held where PREA topics are discussed. The PREA video is shown in both English and Spanish on channel 3, an internal facility channel.

Posters and detainee handbooks are provided to detainees or posted in the housing units in formats accessible to all detainees to ensure that key information is continuously and readily available or visible to detainees. Information on the posters and in the handbook, include: detainee rights; how to report; what to expect after you report; and how to protect yourself against sexual assault. All information presented is provided in both English and Spanish and to detainees who have low vision or hearing or with limited reading skills in a manner they can understand.

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

CCA Policy 14-2 requires the institution's investigator receives specialized training in addition to the general education provided to all employees. Specialized training for investigators covered all requirements of the standard to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation the investigator received both the general and investigative PREA training. The auditor reviewed four investigator training records. The main PREA investigator retired the week before the audit. The PREA Compliance Manager was the acting PREA investigator until the new PREA investigator is transferred and completes staff inprocessing. The PREA Compliance Manager had documentation demonstrating he had received the specialized PREA investigator training. He confirmed receiving this specialized training and was knowledgeable of his responsibilities in conducting sexual abuse investigations.

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

CCA Policy 14-2 outlines the training required for medical and mental health practitioners to include how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. CoreCivic has developed a very comprehensive training for its medical and mental health practitioners. The facility maintains documentation that all medical and mental health practitioners have received this training. In interviews with the medical and mental health staff, they acknowledged receiving basic PREA training,

PREA medical specialized training and knew how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Each medical and mental health staff formally and informally interviewed described their role through each step of the process following an allegation of sexual abuse through follow-up services. Nevada Southern Detention Center staff does not conduct forensic examinations. Detainees are initially sent to Desert View Hospital and referred to University Medical Center or Sunrise Hospital for forensic exams by a SANE/SAFE.

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

CCA Policy 14-2 requires Nevada Southern Detention Center to conduct a screening for risks of sexual victimization and abusiveness within 24 hours of arrival by medical staff; and a follow-up screening for risks of sexual victimization and abusiveness within 30 calendar days from detainee arrival by unit management team. CCA Policy 14-2 requires the institution reassesses detainee's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the detainee's risk of sexual victimization or abusiveness.

All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates using CCA Form 14-2B. The information is gathered from the detainee record and/or asked during the screening process. The auditor reviewed two detainee screening forms (initial and follow-up screen) prior to the audit. On-site the auditor randomly selected 37 detainees and reviewed their initial and reassessments within 30 days screening forms. All initial and follow-on screens were done timely. During detainee interviews, all detainees who arrived within the last 12 months remembers receiving the initial screen upon arrival, some remember a second screen. Through observation of screens conducted, staff and detainee interviews, screeners screening of the auditor, the auditor determined detainees are not disciplined for not answering any questions during the PREA screening process.

On the first night of the audit, the auditor observed a shipment of detainees to Nevada Southern Detention Center go through the intake process, specifically the initial PREA screens. The PREA screens were done in private. During staff interviews, the auditor had staff who performs the screen to conduct a screen of the auditor to demonstrate the process of filling out the screening form. The CCA Form 14-2B is completed by the screener as part of the intake process. In both cases the process was done very professionally by the screening and medical staff. All the criteria referenced in the standard are on the form and detainees are asked all the questions required to be asked to the detainee. The screen also requires the screener to make his/her own assessment of whether the detainee is gender non-conforming. Some of the screeners interviewed could not correctly define gender nonconforming or transgender. Screening staff who must make their own assessment if the inmate is gender nonconforming cannot properly make the assessment if they do not know the definition of and understand gender nonconforming and transgender. Corrective Action Plan: Train all staff who conduct PREA screens on PREA definitions (specifically gender nonconforming and transgender), and practice identifying persons who are gender nonconforming. Provide the auditor documentation of such training; and the auditor conduct follow-up interviews with screeners. Nevada Southern Detention Center conducted training of screeners in July and August 2017, and provided the auditor documentation. The auditor conducted follow-up interviews with screeners on October 13, 2017; and finds Nevada Southern Detention Center compliant with the standard on October 16, 2017.

The screening instrument is objective in determining if the detainee is at risk for victimization or abusiveness. Referrals are made to the Mental Health Coordinator as warranted (previously sexually victimized or sexually abusive). Observation of where screening information is maintained, and staff interviews confirmed appropriate controls have been implemented to ensure that sensitive information is not released and exploited by staff or other inmates. The screening instrument was restricted to staff making housing, work and program assignments.

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

CCA Policy 14-2 outlines the use of the screening form to include: using the information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate those detainees at high risk of being sexually victimized from those at high risk of being sexually abusive; and making individualized determinations about how to ensure the safety of each detainee. CCA Policy 14-2 states the agency shall consider on a case-by-case basis whether to assign a transgender or intersex detainee to an institution for male or female detainees, housing and programming assignments, based on the detainee's health and safety, detainee's own views with respect to his or her own safety, and whether the placement would present management or security problems; reviewing twice a year placement and programming assignments for each transgender or intersex detainee to review any threats to safety experienced by the detainee; allowing transgender and intersex detainees the opportunity to shower separately from other detainees; and not placing lesbian, gay, bisexual, transgender, or intersex detainees in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such detainees.

Through a review of screening forms, housing and program decisions, detainee and staff interviews, it was determined Nevada Southern Detention Center uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping detainees at high risk of being sexually victimized separate from those at high risk of being sexually abusive. The decisions are made on a case-by-case basis using information from the screen, assigned PREA classification, and good correctional judgment. On interview with the Assistant Warden, he explained how the facility utilizes information from the 14-2B form.

The agency does not place lesbian, gay, bisexual, transgender, or intersex detainees in dedicated facilities, units or wings solely based on such identification. On interview with detainees who self-disclosed they were gay, lesbian or bisexual, they all reported that they have not been placed in any special housing unit because of their sexual orientation. Transgender or intersex detainee's own views with respect to his or her own safety are given serious consideration when making housing, programs and other decisions; and transgender and intersex detainees are given the opportunity to shower separately from other detainees. Transgender detainees interviewed stated they were given an opportunity to shower separately from other detainees and was not housed in dedicated facilities, units or wings solely based on identifying as transgender.

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

CCA policies 14-2 and 10-1 Restrictive Housing Management, states detainees at high risks for sexual victimization shall not be placed in

involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers; if placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; that the institution shall document any access to programs, privileges, education, or work opportunities that was restricted, duration of restriction and why; and that every 30 days, the institution shall afford each such detainee a review to determine whether there is a continuing need for separation from the general population. Other measures included moving housing areas or facilities. It was confirmed through investigative paperwork and during interviews with the Warden, PREA Compliance Manager, and segregation staff who supervise segregated detainees that six (6) detainees at high risk for sexual victimization had been placed in involuntary segregated housing for less than 24 hours while completing the assessment during the past 12 months prior to the audit; and that detainees at high risk of sexual victimization would not be placed in involuntary segregation unless other measures have been assessed.

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

CCA Policy 14-2 require facilities provide multiple internal and external ways for detainees to report sexual abuse, sexual harassment and retaliation by other detainees or staff for reporting sexual abuse and sexual harassment. Detainee handbooks, PREA handouts, education video and posters throughout the facility provide specific internal and external ways for detainees to report sexual abuse, sexual harassment and retaliation by other detainees or staff for reporting sexual abuse and sexual harassment. Interviews of detainees and staff verified the detainees and staff knew of the multiple internal and external ways to report incidents of abuse or harassment, and retaliation. The auditor tested the phone numbers posted during the tour. Detainees can report verbally and in writing to staff; a 24-hour toll free hotline to DoJ OIG and facility investigator office; write the CoreCivic Managing Director for Institution Operations, 3rd party, toll free hotline to United States Marshals Service, and Community Action Against Rape DBA, the Rape Crisis Center. Most detainees said they would report to staff. Investigations demonstrated most allegations were reported to staff. The auditor called the DoJ OIG hotline and discussed the process with staff that monitors the phone line. The hotline provides a mailing address by recording.

CoreCivic policies and staff fliers provide information on PREA to include ways for staff to privately report sexual abuse and sexual harassment of detainees. During interviews, staff knew they could privately report sexual abuse and harassment of detainees to the CoreCivic Ethics and Compliance hotline or submitted directly to the PREA Compliance Manager, PREA Coordinator, or Warden.

The agency's policy mandates that staff accept all reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties. Staff and detainee interviews verified that they are aware that they can report verbally, in writing or through a report of a third party. Staff also verified that they have access to private reporting.

CoreCivic does not detain individuals solely for civil immigration purposes.

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

X Not Applicable

Nevada Southern Detention Center does not have an administrative process to address detainee grievances regarding sexual abuse. All PREA allegations are processed through the investigative process in accordance with CoreCivic policies.

#### **Standard 115.53 Inmate access to outside confidential support 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

CCA Policy 14-2 states detainees shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving detainees mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations; and the institution shall enable reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. Based on the MOU, Community Action Against Rape DBA, the Rape Crisis Center is used for outside confidential support services.

Nevada Southern Detention Center detainee handbook and posters do not list Community Action Against Rape DBA, the Rape Crisis Center for providing outside emotional support services, but rather only for reporting. Majority of detainees during interviews did not know of outside services. Corrective Action Plan: Update posters and handbook (can be an addendum), post new posters, and conduct training/information program during town hall with detainees. Provide documentation of training when completed. Nevada Southern Detention Center posted new posters and fliers with information to receive outside confidential emotional support in August 2017; conducted town hall meetings with the updated information to receive outside confidential emotional support in August and September 2017; and provided the auditor pictures of the posted information and the town hall meetings agenda and subjects on October 2, 2017. On October 2, 2017, the auditor found Nevada Southern Detention Center compliant with the standard.

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

CoreCivic PREA website outlines methods to receive third party reports of sexual abuse and sexual harassment. CoreCivic has a PREA section on their web site, and the PREA section is easily accessible. On the PREA page there is a section that specifically addresses how detainees and others can report to include third party. It provides a phone number to the National Sexual Assault Hotline and CoreCivic's Ethics and Compliance Helpline; along with information to write to the Warden at the institution. It states "It is not required that any personal information be provided. However, the more information that can be provided regarding dates, times, locations, witnesses, and as much detail about the alleged incident as is known serves to assist staff and law enforcement in their efforts to successfully conduct the investigations." Nevada Southern Detention Center has posters in the visitation area and throughout the facility that provides the same 3<sup>rd</sup> party reporting information that is found on the CoreCivic PREA website. Detainee interviews demonstrated they know of and the process for 3<sup>rd</sup> party reporting and that it could be reported confidentially. There were no third part reports of allegation in the last 12 months.

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

CCA Policy 14-2 require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. Any retaliation or suspected retaliation against staff or detainees must also be immediately reported. Health practitioners are required to report sexual abuse and to inform detainees of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. The institution reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, to the institution investigator or PREA Compliance Manager. Review of investigative files; and interviews of staff and detainees verified staff immediately report to the Nevada Southern Detention Center designated investigator or PREA Compliance Manager any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Health practitioners during interviews stated they are required and would report sexual abuse. Random interviews with staff revealed that staff is very aware of their responsibilities to report incidents of sexual abuse or harassment to the investigator or their supervisor and know not to reveal any information about a sexual abuse incident to other staff. Interviews with detainees and staff did not reveal any incident of sexual abuse or harassment not reported to the institution's designated investigator. In the past 12 months, there have been no reports of retaliation against staff or detainees.

Nevada Southern Detention Center houses adult male and female detainees, all of whom according to their classified level of care, are not considered to be vulnerable adults under the State Vulnerable Persons Statute.

#### **Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These**

**recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

CCA Policy 14-2 requires staff to take immediate action to protect any detainee they learn is subject to substantial risk. Interviews with staff demonstrate they know the steps to take to protect a detainee subject to risk of imminent sexual abuse. Security staff immediately employs protection measures such as separate the detainee from where or whom at risks with; pass the information is passed to the Investigator, PREA Compliance Manager and Warden. The Warden, PREA Compliance Manager, and investigator confirmed there have been no incidents in the past 12 months, where it was necessary for the institution to take any action in regard to a detainee being at substantial risk of sexual abuse.

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

CCA Policy 14-2 requires when an allegation that a detainee was sexually abused while confined at another institution, the Warden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation; that all sexual abuse allegations reported by another institution regarding any detainee that was confined at the Nevada Southern Detention Center be fully investigated. Interviews with the Warden and PREA Compliance Manager confirmed their knowledge of the policies and responsibilities to report any allegations and investigate any allegations that may have been reported at Nevada Southern Detention Center. The auditor reviewed a case from during the audit cycle where a detainee told medical staff of an abuse at a jail in another state. The PREA Compliance Manager made proper notifications to the jail leadership. There have been no reports of allegations of sexual abuse received from other facilities that were alleged to have occurred at Nevada Southern Detention Center.

#### **Standard 115.64 Staff first responder duties**

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

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

CCA Policy 14-2 and 14-2C Sexual Abuse Incident Check sheet outlines procedures to respond to an allegation of sexual abuse for both security and non-security staff. Staff carry a PREA card which outlines first responder duties and steps. Prior to the audit Nevada Southern Detention Center provided one incident report and first responder completed checklists for review. Random interviews with staff; and first responder checklists confirmed both security and non-security staff knew what to do upon learning a detainee was sexually abused to include separating the alleged victim and abuser; how to preserve the crime scene; and what actions detainees should not take in order not to destroy physical evidence. Good training has prepared the staff to properly respond. Review of investigations further demonstrated staff knew what

to do as the first responders to allegations of sexual abuse. The detainee interviewed who reported sexual abuse said the first responders responded professionally and the response was good.

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

CCA policies 14-2 and 13-79 for Nevada Southern Detention Center, and 14-2C Sexual Abuse Incident Checklists serves as Nevada Southern Detention Center plan to coordinate actions taken in response to an incident of sexual abuse, amongst staff first responders, medical and mental health practitioners, investigators, and institution leadership. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and review of the Sexual Abuse Incident Checklists, and investigative files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities.

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

Nevada Southern Detention Center has no collective bargaining agreement. Nothing limit CoreCivic's ability to remove alleged staff sexual abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted up to and including termination. Based on investigative files and interviews, alleged abusers whether staff or detainees are separated from alleged victim during the investigation, and further if necessary. During the tour the auditor talked to a correctional officer who had a PREA allegation against her, and she was moved during the investigation. She stated at first, she was offended she was moved, but that it was explained to her by her superiors and she believes separating the alleged detainee victim and alleged staff abuser is a good thing.

#### **Standard 115.67 Agency protection against retaliation**

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

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

CCA Policy 14-2 outlines the policy and procedures for monitoring staff and detainees against retaliation. It includes designating a staff member to monitor for retaliation against staff or inmates who reported or had been sexually abused or harassed; provided multiple protection measures for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations; monitoring the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff; and conducting periodic status checks through interviews at least every seven days; monitoring will occur for at least 90 days following the report of the allegation; and may go beyond the 90 days if the monitoring indicates a continuing need.

Previous CCA Policy 14-2 stated monitoring began after the conclusion of the investigation for findings of substantiated and unsubstantiated. Monitoring is conducted using CCA Form 14-2D PREA Retaliation Monitoring Report, which states monitoring should begin following the report of sexual abuse. Nevada Southern Detention Center was following the old policy and not the form. CoreCivic updated the policy with an addendum in May 2017 when the discrepancy was discovered at another CoreCivic facility PREA audit. Nevada Southern Detention Center did not change their policy till 5 July when it was approved by the U.S. Marshal Service. Interview of the staff that conducts the monitoring knew of the change and the procedures. Corrective Action Plan: Provide monitoring for any cases up to 90 days after implementing new policy. A case from June 2017 was the first case where monitoring was conducted following the allegation being reported. The auditor received monitoring from that case and the only other alleged PREA incident (July 2017) since the audit till October 2, 2017. The auditor found Nevada Southern in compliance with the standard on October 13, 2017.

Nevada Southern Detention Center uses multiple protection measures, such as housing changes or transfers for detainee victims or abusers, and removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Nevada Southern Detention Center reports zero retaliations have occurred.

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

CCA Policy 14-2 states involuntary segregated housing for detainees who have alleged to have suffered sexual abuse may be used only after an assessment of all available housing alternatives has shown there are no other means of protecting the detainee; and use of protective custody to protect alleged victim is only used as a last resort for a very short time. If placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; and that the institution shall document any access to programs, privileges, education, or work opportunities that was restricted and that every 30 days, the institution shall afford each such detainee a review to determine whether there is a continuing need for separation from the general population. There were no detainees who have alleged to have suffered sexual abuse in protective custody during the audit. Per interviews of the Warden, and segregation staff, there were no instances of using segregation housing to protect detainees who had alleged to have been sexually abused in the last 12 months.

### **Standard 115.71 Criminal and administrative agency 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on review of CCA Policy 14-2; the 11 PREA investigations; interviews of Nevada Southern Detention Center Warden, PREA Compliance Manager; and investigator it was determined investigations into allegations of sexual abuse and sexual harassment are done promptly, thoroughly, and objectively for all allegations. Investigation files were organized and properly documented. Administrative and criminal investigations are documented in written reports. Written reports are maintained as long as the alleged abuser is incarcerated or employed by the agency, plus ten years under CCA Policy 1-15B. Nevada Southern Detention Center conducts administrative investigations. The Nye County Sheriff's Office investigates all criminal offenses including sexual abuse investigations. The facility investigator conducts investigations immediately when notified of an allegation of abuse and notifies the US Marshals who contact the Nye County Sheriff's Office of allegations that appear to be prosecutable who conducts criminal investigations pursuant to the requirements of this standard. Nevada Southern Detention Center investigator have received special training in sexual abuse investigations. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as detainee or staff. CoreCivic does not require a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Based on reviews of investigations and the investigator interview, investigators: interview victims and witnesses; review camera, phone and mail monitoring, physical evidence, DNA evidence, and detainee records. The departure of the alleged abuser or victim from the employment or control of CoreCivic does not provide a basis for terminating an investigation. There were no sexual abuse allegations referred for prosecution in the past year. The investigator, when interviewed, was well versed in his responsibility of handing administrative investigations as required by this standard.

The auditor reviewed the 11 allegations of a sexual abuse and sexual harassment in the last 12 months at Nevada Southern Detention Center. There were seven (7) detainee-detainee allegations: four (4) detainee-detainee sexual harassment unsubstantiated; two (2) detainee-detainee sexual abuse unfounded; and one (1) detainee-detainee sexual abuses unsubstantiated. There were four (4) staff-detainee allegations: one (1) staff-detainee sexual harassment unsubstantiated; two (2) staff-detainee sexual abuses unsubstantiated; and one (1) staff-detainee sexual abuse unfounded.

Based on policy, review of investigations and investigator interview, investigations are not ended because the victim or the abuser is no longer under the custody of the agency. This would also be the case if the alleged abuser was a staff member and resigned from the facility; the investigation would go on until its conclusion.

### **Standard 115.72 Evidentiary standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

A review of CCA Policy 14-2 and investigations; and interviews with the investigator and administrative staff confirm the Nevada Southern Detention Center has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. When the investigator was asked what standard of evidence was used in determining if an allegation is substantiated, the agencies policy was recited confirming compliance with the standard. The 11 investigations reviewed confirmed no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

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

CCA Policy 14-2 requires facilities to inform the detainee as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the detainee as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the detainee whenever the staff member is no longer posted within the detainee's unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the detainee allegation is against an inmate be whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all notifications will be documented.

Prior to the audit, Nevada Southern Detention Center provided one example of notification to the inmate. Nevada Southern Detention Center uses CCA Form 14-2E Inmate Resident PREA Allegation Status Notification for notification to inmates whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and if the inmate allegation is against an inmate be whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution. In review of investigative packets for allegations of sexual abuse and sexual harassment, notifications (Form 14-2E) are being completed and presented to the detainees informing them of the outcome of the investigation of their allegation of abuse. Review of documentation and interview of detainees who alleged sexual abuse or sexual harassment, confirmed detainees were informed of results of the investigation and any applicable action taken.

### **Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These**

**recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy as outlined in CCA Policy 14-2 requires staff to sign a Code of Conduct Acknowledgement form when first hired and annually. Any staff member who violates the Code of Conduct is subject to corrective action up to and including termination. In the past 12 months, no staff have been disciplined or terminated for violating the agency's sexual abuse or sexual harassment policy. Interviews with Nevada Southern Detention Center staff confirmed staff knew they are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies and that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. In the past 12 months no staff member had a PREA investigation that resulted in a substantiated finding or disciplinary sanction.

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

Per CCA Policy 14-2; and interviews with Nevada Southern Detention Center staff, contractors, and volunteers; contractors or volunteers are prohibited from engaging in sexual abuse, and those that do are prohibited to have contact with detainees and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported that have been no allegations of sexual abuse by contractors or volunteers during the audit cycle. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of detainees or staff.

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

CCA Policy 14-2, and interviews with Nevada Southern Detention Center staff was used to verify compliance to this standard which outlines conduct for detainees and sanctions imposed for misconduct. Detainees will face disciplinary sanctions through the disciplinary process if they violate the agency's zero-tolerance policy which prohibits detainee-on-detainee sexual abuse. Detainees who engage in sexual misconduct with staff are disciplined if it is found that the staff member did not consent to such contact. In the past 12 months there have been no disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that a detainee engaged in detainee-on-detainee sexual abuse or following a criminal finding of guilt for detainee-on-detainee sexual abuse. There were no detainee substantiated findings for sexual abuse. In interview, the Mental Health Coordinator stated counseling would be offered to the offending detainee as well as the victim. Nevada Southern Detention Center prohibits all sexual activity between detainees and discipline detainees for



such activity.

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

CCA Policy 14-2 requires all new detainees receive a PREA screen upon arrival, along with a medical and mental health screen. If any of these identify someone as having experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community, they will be offered a medical and mental health follow-up meeting within 14 days. Prior to and during the audit, the auditor reviewed five (5) PREA screens and medical and mental health documents. Based on those documents and detainee and staff interviews, the auditor determined detainees who reported prior sexual victimization or previously perpetrated sexual abuse were offered consults with medical and mental health practitioners within 14 days of the screen. These are referrals specify based on PREA screen. All other detainees are seen by mental health staff for a Mental Health Evaluation within 14 days of arrival to the facility per CCA Policy 13-50 as part of the in-processing process. Interviews of medical and mental health staff confirmed follow-up meetings are scheduled and conducted; any information related to sexual victimization or abusiveness that occurred in the institution is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

115.81 (c) is NA Nevada Southern Detention Center is not a jail.

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

Per CCA policies 14-2 and 13-79, detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; detainee 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; and qualified medical practitioners are on duty 24 hours. Upon returning from the hospital a registered nurse evaluates and documents the detainee's health status, and refers mental health services. The detainee is prioritized for sick call and if the emergency room did not provide information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, it is done at the Nevada Southern Detention Center. Per the medical staff most times they would just follow-up what orders the hospital has provided along with providing information about emergency contraception and sexually transmitted infections prophylaxis. Per

CCA policies 14-2, 13-79, and 13-80 detainee victims of sexual abuse shall receive timely, unimpeded access to outside emergency medical exams without financial costs. The services at no costs are provided regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Detainees in need of forensic exam are referred to Desert View Hospital who makes referrals to the University Medical Center or to Sunrise Hospital for forensic exam by a SANE/SAFE at no cost to the detainee for these services. There have been no forensic exams in the last 12 months. One detainee was sent to Desert View Hospital, but no forensic exam was conducted. Interview with the medical staff confirmed this practice and that the requirements of this standard are adhered to.

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

Based on review of CCA policies 14-2, 13-79, and 13-80, interviews with the Health Services Administrator and medical/mental health staff and detainees, and review of medical and mental health documentation, Nevada Southern Detention Center offers medical and mental health evaluation and treatment to all detainees who have been victimized of sexual abuse and mental health evaluations are conducted on all known detainee abusers within 60 days of learning such abuse. Based on policies and interviews, when detainees return from the hospital a registered nurse evaluates and documents the detainee's health status, and refers mental health services. The detainee is prioritized for sick call and if the emergency room did not provide information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, it is done at the Nevada Southern Detention Center. Victims will be offered prophylactic treatment and follow-up for sexually transmitted diseases, counseling and testing and are referred to the mental health staff for crisis intervention as necessary. Female victims of sexual abuse are offered pregnancy tests and if pregnancy occurs victims receive pregnancy-related information and medical services. All services to victims are provided at no cost to the detainee regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Nevada Southern Detention Center provides victims with medical and mental health services consistent with the community level of care.

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

CCA policies 14-2 and 5-1 identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews to include a form the review team uses that addresses whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity;

lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff. The auditor reviewed 11 incident reviews during the audit. The review occurs within 30 days of the conclusion of the investigation. The review team includes the PREA Compliance Manager, investigators, security, staff who monitors for retaliation, and medical or mental health practitioners with input from line supervisors. CoreCivic uses CCA Form 14-2F that addresses all elements of the standard. Incident review team members were interviewed and were very knowledgeable of the process.

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

CCA Policy 14-2 requires the collection of uniform data that provides the minimum data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

CoreCivic collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument (Incident Reporting Tracking System). The policy requires information be entered in the Incident Reporting Tracking System on all allegations. The system allows the CoreCivic to aggregate the incident based sexual abuse data to prepare an annual PREA report, monitor trends, and take corrective action, and the institution submit the annual DOJ Survey of Sexual Violence (if requested). Review of previous DoJ Survey of Sexual Violence reports, annual agency PREA reports, and data submitted by the institution demonstrated the agency collects uniform data to be used by CoreCivic. CoreCivic does not contract its detainees to other facilities (115.87 (e)). CoreCivic does provide the data to each facility respective client.

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

CCA Policy 14-2 requires the agency to review all of the data collected from all its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse program and practices. Based on interviews of the PREA Coordinator and PREA Compliance Manager and review of the CoreCivic website, the agency reviews all of the data collected from all its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse program and practices.

An annual report is published and posted on the CoreCivic website. The CoreCivic annual report was thorough, provided corrective  
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measures taken and addressed the agency progress in addressing sexual abuse. Nevada Southern Detention Center provided CoreCivic 2015 annual report, the 2016 annual report was provided during the interim report writing period. Based on interviews with the PREA Compliance Manager, PREA Coordinator and review of the CoreCivic website, CoreCivic reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. This information is available to the public on the CoreCivic website and can be accessed at <http://www.cca.com/security-operations/PREA>.

The website is very informative and rather easy to find the PREA section. CoreCivic PREA page lists: general information on PREA; agency zero tolerance policy; how to report; information on investigations; and where questions and inquiries can be forwarded to (PREA Coordinator phone and mailing address). It also has a number of links to include: PREA standards; CoreCivic PREA policies; CoreCivic 2013, 2014, 2015, 2016 PREA Report; and CoreCivic Institution PREA information. The CoreCivic Institution PREA information link lists each CoreCivic institution with information on that institution's PREA Compliance Manager; third party reporting methods; PREA policy; PREA audit dates; and the last PREA audit report.

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

CCA Policy 14-2, review of the CoreCivic website, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities is available to the public through its website. All CoreCivic institution 2013, 2014, 2015, and 2016 data is in the annual report and posted on the website. CoreCivic maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection in accordance with the CoreCivic Retention Records Schedule. Before making aggregated sexual abuse data publicly available, CoreCivic removes all personal identifiers.

### AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.



Davis K. Haasenritter

December 8, 2017

Auditor Signature

Date