PREA AUDIT REPORT ☐ Interim ☒ Final ADULT PRISONS & JAILS

Date of report: December 29, 2017

Auditor Information				
Auditor name: David Haasenritter				
Address: PO Box 1265 Mid	llothian, VA 23113			
Email: davidkhaasenritter@	gmail.com			
Telephone number: 540	903 6457			
Date of facility visit: June	e 19-21, 2017			
Facility Information				
Facility name: Northwest 1	New Mexico Correctional Center			
Facility physical address	1700 E. Old Hwy 66 Grants, NM 8	7020		
Facility mailing address	: (if different from above) P.O. Box	800 Grants,	NM 87020	
Facility telephone numb	per: 505-287-2941			
The facility is:	☐ Federal	☐ State		☐ County
	☐ Military	☐ Municip	oal	☑ Private for profit
	☐ Private not for profit			
Facility type:	☑ Prison	□ Jail		
Name of facility's Chief	Executive Officer: Betty Judd			
Number of staff assigne	ed to the facility in the last 12	months: 1	37	
Designed facility capaci	ty: 792			
Current population of fa	ncility: 702			
Facility security levels/i	inmate custody levels: Low/Me	dium		
Age range of the popula	ition: 18-70			
Name of PREA Complian	nce Manager: Rolando Valencia		Title: Assistant Ward	en
Email address: rolando.va	lencia@CoreCivic.com		Telephone number	r: 505-287-2941 ext.23402
Agency Information				
Name of agency: CoreCiv	vic			
Governing authority or	parent agency: (if applicable) N	A		
Physical address: 10 Bur	ton Hills Blvd., Nashville, TN 37215	5		
Mailing address: (if diffe	rentfromabove) SAA			
Telephone number: 615-	263-3000			
Agency Chief Executive	Officer			
Name: Damon Hininger Title: President and Chief Executive Officer				
Email address: Damon Hininger@CoreCivic.com Telephone number: 615-263-3301				
Agency-Wide PREA Coordinator				
Name: Eric Pierson			Title: Senior Director	, PREA Audit & Compliance
Email address: Eric Pierso	on@CoreCivic.com		Telephone number	r: 615-263-6915

AUDIT FINDINGS

NARRATIVE

The PREA audit of the Northwest New Mexico Correctional Center was conducted on June 19 - 21, 2017 by Mr. David Haasenritter. Northwest New Mexico Correctional 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. 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 night before the audit the institution provided a roster of all inmates housed at the institution; lists of inmates for specific categories to be interviewed; and a lists of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specific category).

The auditor contacted Just Detention International (JDI) in reference to any information previously submitted by inmates at the Northwest New Mexico Correctional Center and reviewed the CoreCivic and New Mexico Corrections Department website prior to the audit. Both websites are 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 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. The New Mexico Corrections Department website provides PREA general information, New Mexico Corrections Department PREA program information, how to report PREA allegations, investigations information to include who does the investigations, services offered to victims, Annual PREA reports from 2012 – 2106, and each facility PREA reports and information.

Following the entrance meeting with staff, the auditor toured the facility on June 19, 2017 and went back to certain areas in the institution on June 19 - 21, 2017. While touring, random inmates and staff were informally interviewed (not counted in interview count) and questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and inmates 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 inmate 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 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 46 staff interviews (16 random, 30 specialized). The CoreCivic PREA Coordinator and Agency head representative was previously interviewed by this auditor during the audit cycle. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; medical staff procedures; investigations; and evidence preservation.

A total of 40 inmates were formally interviewed: 40 random interviews and 19 specialized interviews (LGBTI (7), who disclosed sexual victimization during screening (6), and limited English (6)). Additionally, two inmates refused their random and specialized interviews. Majority of the inmates interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmate's handbooks) in a language they understand outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; reported staff of the opposite gender announced when entering a housing area; and knowledge of outside confidential support services. All but one inmate interviewed when asked stated they felt safe at the institution. The auditors found the inmates very aware of PREA. One inmate during his interview stated "this was one of the few facilities to take PREA seriously."

Prior to the audit, the facility provided the auditor one PREA case from the audit cycle. The auditors reviewed eight (8) PREA investigations on-site and during the interim report writing period from the audit cycle. Investigative files reviewed appeared to thoroughly document the investigation, followed proper procedures, and were referred to the appropriate investigative agency, and investigations were properly conducted. There was one (1) inmate-inmate allegation reviewed: inmate-on-inmate sexual abuse that was determined to be unfounded. The auditor reviewed seven (7) staff-on-inmate allegations: one (1) staff-on-inmate sexual harassment unfounded; one (1) staff-on-inmate sexual abuse substantiated; three (3) staff-on-inmate sexual abuses unsubstantiated; and two (2) staff-on-inmate sexual abuse unfounded (one (1) of the unfounded was changed to staff misconduct which was founded). Two (2) of the staff-on-inmate sexual abuse were for voyeurism.

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 Core Civic, New Mexico Corrections Department, and Northwest New Mexico Correctional 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 modified policies, and additional documents.

DESCRIPTION OF FACILITY CHARACTERISTICS

Northwest New Mexico Correctional Center is located at 1700 E Old Hwy 66, Grants New Mexico. It was formerly known as the New Mexico Women's Correctional facility, the mission changed in October 2016. The 792-bed facility is owned and operated by CoreCivic, contracted to house and provide New Mexico Corrections Department male inmates who are within two years of release intensive reentry programs designed to prepare inmates for release to the community. Reentry programs are largely focused on drug and alcohol treatment and management. The new mission and extensive program offerings reflect New Mexico's increasing emphasis on inmate reentry.

The count on the first day of the audit was 702 inmates. There are 21 housing units (counting the restrictive housing unit) consisting of both single cells and dormitory units. The facility includes the normal facility support activities kitchen, visitation, recreation, industry, and program areas. Security measures include 209 cameras in total (inside and outside).

Northwest New Mexico Correctional Center is one of the first CoreCivic facilities to implement a process called "Go Further," which is founded on the belief that every moment of incarceration should be focused on successful reentry. "Go Further" is a three-step process that provides tools for success. Inmates can participate in programs such as Education, Faith-Based, Substance Use Disorder Treatment, Family Reunification, and Reentry Skills that provide inmates with the tools needed to make good choices in life.

SUMMARY OF AUDIT FINDINGS

On June 19 - 21, 2017, the on-site visit was completed. Three standards (115.15, 115.41, and 115.67) required minor corrective action. On August 15, 2017, the Northwest New Mexico Correctional Center was found in full compliance:

Number of standards exceeded: 4

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 1

Standa	rd 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)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
New Me has a ba sexual a facility l and faci Miscond harassm	exico Cor se CCA I buse and has a CCA lity speci- luct; Rep- ent which	es the Northwest New Mexico Correctional Center to house New Mexico Corrections Department inmates. Northwest rectional Center follows both CCA Policy 14-2 and New Mexico Corrections Department Policy CD.150100. CoreCivic Policy 14-2 Sexual Abuse Prevention and Response, which is the written plan mandating zero tolerance towards all forms of sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct. Each A Policy 14-2 Sexual Abuse Prevention and Response modified for its facility based on client guidance and requirements fic procedures. New Mexico Corrections Department Policy CD.150100 Offender Protection Against Abuse and Sexual porting Procedures, PREA is a written plan mandating zero tolerance towards all forms of sexual abuse and sexual a outlines the agency's approach to preventing, detecting and responding to such conduct. Other CoreCivic and New ons Department policies supplement these base PREA policies.
Coordin oversea	ator, and PREA co	ys an upper-level, agency-wide PREA coordinator and a PREA compliance manager. Mr. Eric Pierson is the PREA a certified PREA auditor. He is knowledgeable of PREA standards and has the authority to develop, implement, and impliance. He indirectly supervises approximately 55 compliance managers. Review of CoreCivic's organizational chart had the authority to coordinate the agency's efforts to comply with PREA.
claimed Review	to have e	ncia serves as the Associate Warden and Northwest New Mexico Correctional Center PREA Compliance Manager. He mough time to perform his PREA duties, and has the authority to develop and coordinate PREA policies and activities. In description and Northwest New Mexico Correctional Center organizational chart demonstrated he had the authority to cility's efforts to comply with PREA. Mr. Valencia assumed the PREA Compliance Manager position in May 2017.
knowled	lge of PR	New Mexico Corrections Department PREA Coordinator was also very helpful during the entire audit process. Her EA is outstanding, she coordinates MOU's with outside agencies for all Correctional Facilities in New Mexico (public and is issues and solutions to have a facility free of sexual abuse.
Warden	Judd was	s very knowledgeable of PREA and the facility PREA procedures and programs.
Standa	ard 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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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 is a private provider and does not contract with other agencies for the confinement of inmates. There is a New Mexico Corrections Department on-site client monitor responsible for ensuring compliance. Monthly inspections on specific standards such as inmate screening is conducted. The auditor reviewed several the monthly inspections from August 2016, December 2016, and May 2017 of standards 115.41 – 115.43 and 115.68. These inspections are just one example of the New Mexico Corrections Department PREA involvement.

Standard 115.13 Supervision and monitoring

\boxtimes	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 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 inmates against sexual abuse by monitoring and reviewing the staffing plans. CCA Policy 14-2 and NMCD Policy CD.150100 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 internal or external oversight bodies; all components of the institution's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); composition of the inmate 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. 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 CCA Form 14-2I Annual PREA Staffing Plan Assessment. The annual review noted staffing changes due to mission change, change from female facility to a male facility, and completion of technology upgrades. There are currently 209 cameras throughout the facility.

CCA Policy 14-2 and NMCD Policy CD.150100 requires the staffing plan be complied with and when it does not, the institution shall document and justify all deviations from the plan. Per the Pre-audit questionnaire and interview of the Warden and PREA Compliance Manager; and review of manning sheets; there were no deviations from the plan. Northwest New Mexico Correctional Center uses overtime to ensure the staffing plan is complied with.

The CCA Policy 14-2 requires unannounced rounds by supervisors and prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Throughout the site review, the auditor saw evidence that intermediate and higher-level supervisors conduct and document unannounced rounds on all shifts to deter and identify staff sexual abuse and sexual harassment. 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 inmate interviews and the logs confirmed the unannounced rounds by supervisors are done on all shifts. Interviews of staff conducting unannounced rounds demonstrated they knew what to check for during unannounced PREA rounds, to include PREA signage, blind spots, and opposite gender announcements. Staff is prohibited from alerting other staff that unannounced rounds are being conducted. Supervisors prevent alerting by visiting housing and program areas at different times throughout the shift.

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)

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 Non-Applicable

Northwest New Mexico Correctional Center is an adult male facility and does not house youthful offenders. New Mexico Corrections Department Policy CD-150100 designates youthful inmates to be housed at the Youthful Offender Management Unit at Central New Mexico Facility.

Standard 115,15 Limits to cross-gender viewing and searches

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	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 9-5 Searches of Inmate/Residents and Various Locations and New Mexico Corrections Department Policy CD 130300 Search Policy; review of training material; interview of staff and inmates; and auditor observation on site; it was determined the facility limits cross-gender viewing and searches. Northwest New Mexico Correctional Center does not conduct cross-gender strip searches or cross-gender visual body cavity searches, and staff is prohibited and does not search transgender or intersex inmates to determine inmates' genital status. The facility provided memorandum stating no cross-gender strip searches or cross-gender visual body cavity searches, the auditor checked inmate search log and there were no recorded cross-gender strip searches or cross-gender visual body cavity searches.

Standards 115.15 b and part of c does not apply as Northwest New Mexico Correctional Center is a male only facility.

Based on review of CCA Policy 14-2 and New Mexico Corrections Department Policy CD.150100; review of training material; and interview of staff and inmates; inmates are able to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks (115.15(d)). Most inmates interviewed stated they could shower and change clothes without being observed by opposite gender staff. Observation during the audit identified male inmates were not able to shower in A Block or use the urinals in all the open bay housing units without opposite gender staff observing their groin or buttocks area. The Corrective Action Plan was to complete modifications in the respective shower and urinal areas so inmates are able to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks. Provide the auditor photos of those areas within 60 days of the on-site audit being completed. Photos of all areas was provided to the auditor on July 16, 2017. The modifications allow inmates to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks in all areas identified during the on-site audit. Northwest New Mexico Correctional Center was found to be compliant with the standard.

Female announces themselves when they enter the housing units and reminders of this practice are posted on the entry doors of all housing units. Inmates interviewed confirmed that this practice is being adhered to and indicated that they feel they have privacy when female staff are in their housing unit. The camera monitors were reviewed and showed that if female staff were observing the monitors, they would not see inmate genitalia or buttocks area.

CCA Policy 14-2 and New Mexico Corrections Department Policy CD.150100 states institutions shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status; and if the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. Through interviews of staff it was determined staff do not search or physically examine a transgender or intersex inmates for the sole purpose of determining the inmate'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 PREA Audit Report 7

pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The auditor found through staff interviews and having staff perform a pat search of him as if he was a transgender inmate, that staff did not know the definition of a transgender inmate and did not know how to conduct pat searches of transgender inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs (115.15 (f)). The Corrective Action Plan was to provide staff refresher training on the definition of transgender; and how to conduct searches of transgender and intersex inmates, 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. Northwest New Mexico Correctional Center conducted training of staff on the definition of transgender and transgender searches on June 28 – 30, 2017. The auditor was provided documents demonstrating the training was conducted. On July 16, 2017 the auditor found Northwest New Mexico Correctional Center compliant with the standard.

Standard 115.16 Inmates wit	h disabilities and inmates wh	no are limited English proficient
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Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

Auditor 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 New Mexico Corrections Department Policy CD 150100 provide guidance to ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. CoreCivic, New Mexico Corrections Department, and Northwest New Mexico Correctional Center has taken appropriate steps to ensure that inmates who are limited English proficient or disabled have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Staff and a language line services provides foreign language translation and assistance. The auditor reviewed the CoreCivic and Language Line contract. Northwest New Mexico Correctional Center has a list of four designated Spanish translators. PREA handouts and inmate handbooks are in English and Spanish. English and Spanish PREA posters are posted throughout the institution for inmates and staff to see. The New Mexico Corrections Department PREA Resource Guide for Inmates is also in English and Spanish. It has a lot of good information to include defining PREA; New Mexico Corrections Department Zero Tolerance Policy; Reporting; phone numbers and address for victim advocates; investigation information; what to do if abused; and how to avoid sexual abuse in confinement. Staff and inmates interviewed stated inmates are not used as interpreters when addressing sexual abuse and sexual harassment allegations.

Informational and educational materials for inmates with physical and mental disabilities are provided in ways that will enable the inmate to understand the CoreCivic and New Mexico Corrections Department zero tolerance policy and related material and be able to make a claim of sexual abuse or sexual harassment, if necessary. For inmates who are hearing impaired, the facility has a Teletype (TTY) machine available for inmates who are hearing impaired. Provisions can be made for inmates who may be visually impaired, though those with limited vision are assisted by some of the posters and handouts having been printed in larger print. For inmates with a mental disability, staff spend time to ensure they understand the PREA basics of definitions and reporting.

Four (4) of the six (6) Spanish speaking inmates interviewed reported they have received all PREA information provided to them in Spanish. Two said it is now but not when they arrived at the facility. The inmates had a good knowledge of PREA and the auditor did observe handbooks, fliers, and posters in Spanish.

Standard 115.17 Hiring and promotion decisions

Exceeds Standard	(substantially	exceeds require	ement of standard)	

\boxtimes	Meets Standard (substantial	compliance;	complies	in all	material	ways with	the standard	for the	е
	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 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 an employee and contractor application packet was reviewed. During the audit, the auditor reviewed one employee application packets and two promotion packets. Through review of personnel records and staff interviews it was determined Northwest New Mexico Correctional 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.

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. NCIC is used to conduct background checks. 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 one employee application packets and one contractor application packet that demonstrated background checks were done prior to employment. The auditor also reviewed 15 random staff and five (5) contractor background checks and found all were less than five years old. The auditor also reviewed the facility background check spreadsheet that demonstrated all background checks were current.

CCA Policy 3-20-2 Career Opportunities states shall ask all applicants and employees who may have contact with inmates 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. CoreCivic uses CCA form 14-2 H Self-Declaration of Sexual Abuse\Sexual Harassment to ask all applicants and employees who may have contact with inmates 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. Prior to the audit received one document each for applicant, staff promotion and annually demonstrating they addressed previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. During the audit reviewed two (2) promotions, one (1) applicant, and 15 randomly selected employees CCA form 14-2 H Self-Declaration of Sexual Abuse\Sexual Harassment that demonstrated applicants and employees who may have contact with inmates 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.

CCA Policy 14-2 states CoreCivic will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Interviews of personnel staff demonstrated they provide the information when requested.

The interview of HR staff demonstrated knowledge of the human resource PREA standards and requirements.

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
PREA Audit Rep	ort 9	

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.

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 inmates 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 inmates from sexual abuse. CCA Policy 14-2 states that when 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 inmates from sexual abuse. Northwest New Mexico Correctional Center has 209 cameras throughout the facility. The cameras are monitored and are recorded.

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)

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 New Mexico Corrections Department Policy CD 150102 Coordinated Response to Sexual Assaults 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.

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. Staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. The Northwest New Mexico Correctional Center investigator during her interview demonstrated she had a good understanding of the investigative procedures and responsibilities and evidence protocols.

CCA Policy 14-2 and New Mexico Corrections Department Policy CD 150102 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. CoreCivic has a MOU with Albuquerque SANE Collaborative who provides a forensic exam with SANE, prophylaxis treatment and facilitates advocacy services. As requested by the victim, a victim advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. Interviews with medical staff demonstrated the steps they perform to initially treat the victim for life saving issues without losing useable evidence, sending the inmate to University of New Mexico Medical Center for a forensic exam if applicable, and providing education and follow-up treatment to the inmate. There were no forensic exams in the last 12 months.

Northwest New Mexico Correctional Center makes available to the victim a victim advocate from a Rape Crisis Center. An MOU with New Mexico Department of Corrections and New Mexico Coalition of Sexual Assault Programs, Inc. allows for victim advocate services such as: victim advocate services and support through medical exam process and investigator interviews, provide emotional support, crisis intervention, information, and referrals. The auditor called the victim advocate number from the inmate phones in the housing unit.

A MOU between CoreCivic and Grants Police Department demonstrated CoreCivic requested Grant Police Department to comply with PREA investigative standards.

Standard 115.22 Policies to ensure referrals of allegations for investigations

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	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 New Mexico Corrections Department Policy CD 150102 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. Grants Police Department conducts the criminal investigations. Administrative investigations are conducted by Northwest New Mexico Correctional Center investigator or the New Mexico Corrections Department Office of Professional Standards Special Agents. CCA Policy 14-2 and the MOU with Grants Police Department describe the responsibilities for each agency. The agency's policy regarding referral of allegations of sexual abuse and sexual harassment for criminal investigation are available on the CCA website. Through a review of the investigative file and interviews of the Warden and investigative staff; it was determined the Northwest New Mexico Correctional 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.

Prior to the audit, the facility provided the auditor one PREA case from the audit cycle. The auditors reviewed eight (8) PREA investigations on-site and during the interim report writing period from the audit cycle. Investigative files reviewed appeared to thoroughly document the investigation, followed proper procedures, and were referred to the appropriate investigative agency, and investigations were properly conducted. There was one (1) inmate-inmate allegation reviewed: inmate-on-inmate sexual abuse that was determined to be unfounded. The auditor reviewed seven (7) staff-on-inmate allegations: one (1) staff-on-inmate sexual harassment unfounded; one (1) staff-on-inmate sexual abuse substantiated; three (3) staff-on-inmate sexual abuses unsubstantiated; and two (2) staff-on-inmate sexual abuse unfounded (one (1) of the unfounded was changed to staff misconduct which was founded). Two (2) of the staff-on-inmate sexual abuse were for voyeurism.

Standard 115.31 Employee training

Exceeds Standard (substantially exceeds requirement of standard)	
Meets Standard (substantial compliance; complies in all material ways with the standard frelevant review period)	for the
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. Northwest New Mexico Correctional Center employees receive PREA training annually through scheduled facility annual training, e-learning training, and staff recall meetings. The CoreCivic PREA training lesson plan/facilitator guide 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; inmates' right to be free from sexual abuse and sexual harassment; the right of inmates 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 inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Some training has been though 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. The auditor randomly selected 15 staff training records, all 15 had documentation that they understood the PREA training and PREA policies in for each of the last two years. It should also be noted training records demonstrated Northwest New Mexico Correctional Center conducted additional annual PREA training in 2016 when the facility transitioned from a female to male facility.

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.

Prior to the audit the auditor reviewed the PREA curriculum; contractor and volunteer training records and memorandum stating they understood the PREA training. CCA 14-2 and the PREA training curriculum outline training requirements for volunteers and contractors who have contact with inmates. The agency maintains documentation confirming that volunteers and contractors understand the training they have received. While on-site the auditor reviewed four (4) contractor/volunteer randomly selected training records that included a memorandum stating they understood the PREA training. Interviews of the contractors and volunteers demonstrated their knowledge of PREA, their responsibilities and the agency zero tolerance policy.

Standard 115.33 Inmate education

Ц	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 New Mexico Corrections Department Policy CD 150100 requires that all inmates receive PREA information upon arrival; PREA education within 30 days of intake (within 10 days by institutional policy); and the information be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The auditor reviewed Northwest New Mexico Correctional Center inmate handbooks, posters and education documents. Per observation and interview of intake staff, inmates are provided PREA information and comprehensive education through an inmate handbook, CoreCivic PREA pamphlet, video, and discussion with staff. Inmate interviews verified information was provided through the inmate handbook and comprehensive education was provided through a combination of staff discussion during orientation and video though not all inmates remembered the video. The auditor reviewed 21 randomly selected inmate's records; all had documentation for having received required PREA information and PREA education. Additionally, each housing unit conducts townhalls

that covers PREA each month. The auditor reviewed the townhall agenda topic outline for March 2016, April 2017, and June 2017.

Posters and inmate handbooks are provided to inmates or posted in the housing units in formats accessible to all inmates to ensure that key information is continuously and readily available or visible to inmates. Information on the posters and in the handbook, include: inmate 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 inmates who have low vision or hearing or with limited reading skills in a manner they can understand. Additionally, how and who to report PREA allegations are printed on the back of the inmates' ID cards.

The New Mexico Corrections Department PREA Resource Guide for Inmates is also in English and Spanish. It has a lot of good information to include defining PREA; New Mexico Corrections Department Zero Tolerance Policy; Reporting; phone numbers and address for victim advocates; investigation information; what to do if abused; and how to avoid sexual abuse in confinement. Inmates can review the New Mexico Corrections Department PREA Resource Guide for Inmates in the library.

One inmate who arrived in 2017 stated "staff discuss PREA information more than any place I have been confined."

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. The investigator received specialized training through the NIC PREA investigator training. Northwest New Mexico Correctional Center maintains documentation the investigator received both the general and investigative PREA training. The auditor reviewed the investigator training records which also included 14 hours of Domestic Violence and Sexual Assault training sponsored by a number of Agencies to include the New Mexico Coalition of Sexual Assault Programs. During her interview the investigator confirmed receiving the NIC PREA investigator training and was knowledgeable of her responsibilities in conducting sexual abuse investigations.

Standard 115.35 Specialized training: Medical and mental health care

\boxtimes	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, one of the best the auditor has reviewed. The facility maintains documentation that all medical and mental health practitioners have received both annual PREA training and the PREA medical 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. During the interviews, each discussed the steps from when the inmate is first brought to medical, steps they perform to initially treat the victim for life saving issues without losing useable evidence, sending the inmate to University of New Mexico Medical Center for a forensic exam if applicable, and providing education and follow-up treatment upon the inmates return from the hospital. The Mental health staff discussed the procedures when inmates are referred to mental health based on a PREA screen and PREA incident. Medical and mental health staff stated they also received PREA training from their company Centurion Correctional Health Care of New Mexico. Medical staff does not conduct forensic medical examinations. SANE exams are conducted at the University of New Mexico Medical Center.

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.

Northwest New Mexico Correctional Center uses the New Mexico Corrections Department PREA screening tool and not the CoreCivic PREA screening tool. New Mexico Corrections Department Policy CD-150100 requires facilities to: conduct a screening for risks of sexual victimization and abusiveness within 48 hours of arrival; a follow-up screening for risks of sexual victimization and abusiveness within a set time period, not to exceed 30 days from the inmate's arrival at the facility; and reassesses inmate's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The auditor reviewed one example of inmate screening forms (initial screen and follow-up screen) prior to the audit. The auditor randomly selected 25 inmates and reviewed their screens during the on-site and interim report writing period. Initial and follow-on screens were done IAW timeline requirements on 24 of 25 inmates. An inmate's risk level is also reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. During inmate interviews, most inmates who arrived within the last 12 months remembered receiving the PREA screen.

The auditor had five (5) staff who conduct the screens perform the screen on the auditor to demonstrate the process of filling out the screening form. The process was done very professionally. Some information is provided through asking the inmate questions, others through review of inmate records. All the criteria referenced in the standard are on the form; and inmates are asked all of the questions required to be asked of the inmate. New Mexico Corrections Department PREA screening form was modified in November 2016. The previous screening form did not consider the criteria of whether the inmate is or is perceived to be intersex, or gender nonconforming; prior acts of prior convictions for violent offenses, and history of prior institutional violence or sexual abuse when determining if the inmate risks of being sexually abused by other inmates or sexually abusive towards other inmates. Though the screener does make his/her own assessment of whether the inmate is gender non-conforming; majority of the screeners interviewed did not know the definition of gender nonconforming. The Corrective Action Plan was to train all staff who conduct screens on PREA definitions, specifically gender nonconforming, and practice identifying persons who are gender nonconforming. Provide the auditor documentation of such training. Northwest New Mexico Correctional Center provided the auditor copies of the training documentation and the auditor found Northwest New Mexico Correctional Center in compliance with the standard.

The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. Referrals are made to the Mental Health Coordinator as warranted. 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)
de mi re	ditor discussion, including the evidence relied upon in making the compliance or non-compliance termination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion as also include corrective action recommendations where the facility does not meet standard. These commendations must be included in the Final Report, accompanied by information on specific prective actions taken by the facility.
information those inmated determinated 150100 state or female in or her own a programmin transgender transgender placement is	14-2 and New Mexico Corrections Department Policy CD 150100 outlines the use of the screening form to include: using the from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate at high risk of being sexually victimized from those at high risk of being sexually abusive; and making individualized and about how to ensure the safety of each inmate. CCA Policy 14-2 and New Mexico Corrections Department Policy CD as the agency shall consider on a case-by-case basis whether to assign a transgender or intersex inmate to an institution for male mates, housing and programming assignments, based on the inmate's health and safety, inmate's own views with respect to his afety, and whether the placement would present management or security problems; reviewing twice a year placement and go assignments for each transgender or intersex inmate to review any threats to safety experienced by the inmate; allowing and intersex inmates the opportunity to shower separately from other inmates; and not placing lesbian, gay, bisexual, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for of protecting such inmates.
Correctiona keeping inm	creening forms, housing and program decisions, and inmate and staff interviews, it was determined Northwest New Mexico Center uses the screening information to determine housing, bed, work, education, and program assignment with the goal of ates at high risk of being sexually victimized separate from those at high risk of being sexually abusive. The decisions are made-case basis using information from the screen, assigned PREA classification, and good correctional judgment.
transgender they were g policy and s consideration	o Corrections Department, CoreCivic, or Northwest New Mexico Correctional Center does not place lesbian, gay, bisexual, or intersex inmates in dedicated facilities, units or wings solely on the basis of such identification. Inmates who self-disclosed by or bisexual reported that they have not been placed in any special housing unit because of their sexual orientation. Based on taff interviews, transgender or intersex inmate's own views with respect to his or her own safety would be given serious in when making housing, programs and other decisions; and transgender and intersex inmates would be given the opportunity to rately from other inmates. There were no transgender or intersex inmates at the facility at the time of the audit.
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)
	ditor discussion, including the evidence relied upon in making the compliance or non-compliance termination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

New Mexico Corrections Department Policy CD 150100, CCA policies 14-2 and 10-1 Restrictive Housing Management, states inmates 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;

recommendations must be included in the Final Report, accompanied by information on specific

must also include corrective action recommendations where the facility does not meet standard. These

corrective actions taken by the facility.

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 inmate 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 inmates that no inmates at high risk for sexual victimization had been placed in involuntary segregated housing during the past 12 months prior to the audit; and that inmates at high risk of sexual victimization would not be placed in involuntary segregation unless other measures have been assessed.

Standard	115.51	Inmate	reporting
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Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

Auditor 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.

Policy 14-2 and New Mexico Corrections Department Policy CD 150100 requires facilities provide multiple internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; all staff to accept reports made verbally, in writing, anonymously and from third parties; and all allegations shall be promptly documented in an incident report and reported to the supervisor.

Inmate handbooks, PREA handouts, education video and posters throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Staff and inmate interviews verified the inmates have multiple internal and external ways to report incidents of abuse or harassment. Inmates can report verbally or in writing to staff, dial the hotline to the Colorado Department of Corrections (external), write the CCA Managing Director for Institution Operations, or through a third party.

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

Examples of inmate reporting through different means were reviewed when investigative cases were reviewed. Staff accepts reports made verbally, in writing, anonymously, and from third parties, and are promptly documenting any verbal reports.

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.

Review of New Mexico Corrections Department Policy CD.150500 Inmate Grievances, and Inmate Handbook, Northwest New Mexico

Correctional Center does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse; does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse; ensures that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint; and issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. There were no PREA grievances files in the last 12 months. Inmates are informed of grievance procedures in the inmate handbook.

Northwest New Mexico Correctional Center may discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith.

Standard 115.53 Inmate access to outside confidential support services

\boxtimes	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 New Mexico Corrections Department Policy CD 150100 states inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations; and the facilities shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

Northwest New Mexico Correctional Center has entered into a Memorandum of understanding with the Rape Crisis Center of Central New Mexico which agrees to provide confidential outside victim advocacies services to the inmates at Northwest New Mexico Correctional Center. This MOU is part of the New Mexico Corrections Department and New Mexico Coalition of Sexual Assault Programs, Inc. bigger agreement coordinated by the New Mexico PREA Coordinator.

The mailing address and telephone numbers, including toll-free hotline numbers are made available to all inmates through various means from fliers to posters throughout the facility. Northwest New Mexico Correctional Center inmates were the most knowledgeable reference outside emotional support services of all PREA audits the auditor has conducted. The auditor tested the phone in the housing unit during the audit. He was connected with a victim advocate who was very professional. This was one of the better victim advocate service the auditor has interviewed.

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 inmates 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."

New Mexico Corrections Department website also provides 3rd party reporting information. It lists a mailing address, email address, PREA reporting line number, and reporting to any staff at the respective facility.

Northwest New Mexico Correctional Center has posters in the visitation area and throughout the facility that provides the same 3rd party reporting information that is found on the CoreCivic PREA website. Inmate interviews demonstrated they know of and the process for 3rd party reporting and that it could be reported confidentially.

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 and New Mexico Corrections Department Policy CD 150100 requires that all staff are to report immediately any knowledge or information regarding an incident of sexual abuse of sexual harassment. Any retaliation or suspected retaliation against staff or inmates must also be immediately reported. Health practitioners are required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Northwest New Mexico Correctional Center staff reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, to the institution investigator. Review of investigative files; and interviews of staff and inmates verified staff immediately report to the institution's designated investigator 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 inmates 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 inmates.

If the alleged victim is under the age of 18 or considered a vulnerable adult under a New Mexico vulnerable persons statute, Northwest New Mexico Correctional Center reports the allegation to the Child and Family Protective Services Department of New Mexico.

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 and New Mexico Corrections Department Policy CD 150100 requires staff to take immediate action to protect any inmate they learn is subject to substantial risk. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security staff immediately employs protection measures as separate the inmate from where or whom at risks with; pass the information is passed to the Investigator, PREA Compliance Manager and Warden. Northwest New Mexico Correctional Center can then monitor, change housing and/or work assignments; request moving the other inmate to another facility or move the other inmate to the restrictive housing unit. 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 an inmate 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 and New Mexico Corrections Department Policy CD 150100 requires when an allegation that an inmate 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 inmate that was confined at the Northwest New Mexico Correctional Center be fully investigated. Interviews with the Warden, PREA Compliance Manager, and investigator confirmed their knowledge of the policies and responsibilities to report any allegations and investigate any allegations that may have occurred at Northwest New Mexico Correctional Center. The auditor reviewed the one allegation that an inmate was sexually abused while confined at a jail. Information was forwarded to the other facility. During the audit cycle, Northwest New Mexico Correctional Center did not receive information from another facility of an inmate alleging sexual abuse while at Northwest New Mexico Correctional Center. During the Warden interview she knew the procedures should her staff be told of an allegation at another facility and when another facility contacts her of an incident that has alleged to occur at her facility.

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 Northwest New PREA Audit Report

Mexico Correctional Center provided one incident report and first responder completed checklists for review. Random interviews with staff; and review of the first responder checklists from investigations reviewed on-site confirmed both security and non-security staff knew what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser; how to preserve the crime scene; and what actions inmates should not take in order not to destroy physical evidence. Good training has prepared the staff to properly respond.

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 Policy 14-2 and 14-2C Sexual Abuse Incident Checklists serves as Northwest New Mexico Correctional 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 files confirmed staff were knowledgeable about the PREA Coordinated 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.

Northwest New Mexico Correctional Center has no collective bargaining agreement. Nothing limit CCA's ability to remove alleged staff sexual abusers from contact with any alleged inmate victims 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 inmates are separated from alleged victim during the investigation, and further if necessary. The auditor reviewed two examples of staff being moved to a non-contact posts and an alleged inmate abuser being placed in restrictive housing during the investigation period.

Standard 115.67 Agency protection against retaliation

 Meets Standard (substantial compliance; complies in all material ways with relevant review period) Does Not Meet Standard (requires corrective action) 		
☐ Does Not Meet Standard (requires corrective action)	Ø	\boxtimes
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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 New Mexico Corrections Department Policy CD 150100 outlines the policy and procedures for monitoring staff and inmates 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. It should be noted in some cases monitoring was conducted using the New Mexico Corrections Department form. Northwest New Mexico Correctional 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. Interview of the staff that conducts the monitoring knew of the change and the procedures. Corrective Action Plan: Continue implementation of the new policy and provide copies of monitoring conducted in June and July to demonstrate continued compliance with the policy change and standard. The auditor reviewed monitoring forms provided, and on August 10, 2017 was satisfied Northwest New Mexico Correctional Center was compliant with the standard. 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.

Through review of CCA Form 14-2D PREA Retaliation Monitoring Report and interviews of the monitor, monitoring includes: periodic face to face status checks, and checks of inmate records for housing changes, disciplinary actions, etc. Northwest New Mexico Correctional Center uses multiple protection measures, such as housing changes or transfers for inmate victims or abusers, and removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Northwest New Mexico Correctional 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 inmates 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 inmate; 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 inmate a review to determine whether there is a continuing need for separation from the general population. There were no inmates 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 inmates who had alleged to have been sexually abused in the last 12 months.

Standard 115.71	Criminal and	administrative	agency	investigations
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Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

Auditor 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.

Prior to the audit, the facility provided the auditor one PREA case from the audit cycle. The auditors reviewed eight (8) PREA investigations on-site and during the interim report writing period from the audit cycle. Investigative files reviewed appeared to thoroughly document the investigation, followed proper procedures, and were referred to the appropriate investigative agency, and investigations were properly conducted. There was one (1) inmate-inmate allegation reviewed: inmate-on-inmate sexual abuse that was determined to be unfounded. The auditor reviewed seven (7) staff-on-inmate allegations: one (1) staff-on-inmate sexual harassment unfounded; one (1) staff-on-inmate sexual abuse substantiated; three (3) staff-on-inmate sexual abuses unsubstantiated; and two (2) staff-on-inmate sexual abuse unfounded (one (1) of the unfounded was changed to staff misconduct which was founded). Two (2) of the staff-on-inmate sexual abuse were for voyeurism.

CCA Policy 14-2 and New Mexico Corrections Department Policy CD 150102 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. Administrative investigations are conducted by Northwest New Mexico Correctional Center investigator or the New Mexico Corrections Department Office of Professional Standards Special Agents. Grants Police Department conducts the criminal investigations. CCA Policy 14-2 and the MOU with Grants Police Department describe the responsibilities for each agency. The agency's policy regarding referral of allegations of sexual abuse and sexual harassment for criminal investigation are available on the CCA website. Through a review of the investigative file and interviews of the Warden and investigative staff, it was determined the Northwest New Mexico Correctional Center ensures that an administrative and/or a criminal investigation is completed for all allegations of sexual abuse and sexual harassment. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

The Northwest New Mexico Correctional Center investigator conducts an investigation immediately when notified of an allegation of sexual abuse and sexual harassment. They do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. If appropriate, it is referred to Grants Police Department or New Mexico Corrections Department Office of Professional Standards. Northwest New Mexico Correctional Center conducts its investigations using uniform evidence protocols. Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

The investigator stated that she collects the appropriate direct and circumstantial evidence, reviews the video tapes, interviews the alleged victim, suspected perpetrators, and witnesses. She also reviews prior complaints and reports of sexual abuse involving the suspected perpetrator. All investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The Investigator also stated that the credibility of the victim, suspect, or witness is always assessed on an individual basis. Polygraphs are not used in PREA investigations. When conducting administrative investigations, the investigator always decides whether staff actions or failures to act contributed to the abuse. The investigator received special training in sexual abuse investigations in a correctional setting through the NIC PREA Investigator Course. The departure of the alleged abuser or victim from the employment or control of CoreCivic or Northwest New Mexico Correctional Center does not provide a basis for terminating an investigation.

Standard 115.72 Evidentiary standard for administrative investigations

Exceeds Standard (substantially exceeds requirement of s	standard)	1
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Meets Standard (substantial compliance; complies in all material ways with the standard for the

		relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	detern must a recom	or discussion, including the evidence relied upon in making the compliance or non-compliance initiation, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion in include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	
investiga Standard harassm	ntor and a ls has no ent are su	A Policy 14-2, and New Mexico Corrections Department Policy CD.150100, and investigations; and interviews with the administrative staff confirm the Northwest New Mexico Correctional Center and New Mexico Office of Professional standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual abstantiated. When the investigator was asked what standard of evidence was used in determining if an allegation is agencies policy was recited confirming compliance with the standard.	
Standa	rd 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)	
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	
unsubsta the alleg member, the instit sexual al related to	ntiated, of station of station of station, the facility of the station, had buse with the sexual at the sexual station.	res facilities to inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the inmate as to whether sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff lity shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at is been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to a charge related to in the institution; if the inmate allegation is against an inmate be whenever the alleged abuser has been indicted on a charge abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all be documented.	
Prior to the audit, Northwest New Mexico Correctional Center provided one example of notification to the inmate. Northwest New Mexico Correctional 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; and if the inmate allegation is against an inmate be notified whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution. In review of investigative files for allegations of sexual abuse and sexual harassment, and interviews of the PREA Compliance Manager and investigator; notifications (CCA Form 14-2E) are being completed and presented to the inmates informing them of the outcome of the investigation and any applicable action taken.			
		Mexico Correctional Center does request all relevant information from the criminal investigation conducted by the Grants at in order to inform the inmate as required by this standard.	
Standa	rd 115.	.76 Disciplinary sanctions for staff	
		Exceeds Standard (substantially exceeds requirement of standard)	
PREA A	udit Rep	ort 23	

	×	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.		
Policy 1 the Code Center's and that have been the inverse PREA in would here.	4-2 require of Conc taff confitermination disciplistigation investigation avestigation	ject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy as outlined in CCA res staff to sign a Code of Conduct Acknowledgement form when first hired and annually. Any staff member who violates tuct is subject to corrective action up to and including termination. Interviews with Northwest New Mexico Correctional rmed staff knew they are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies on is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. In the past 12 months, no staff ined or terminated for violating the agency's sexual abuse or sexual harassment policy. One staff member resigned during of sexual abuse (kissing and giving hickeys), thus no disciplinary action. In the past 12 months no staff member had a on. All terminations for violations of CoreCivic sexual abuse or sexual harassment policies, or resignations by staff who terminated if not for their resignation, are reported to law enforcement, unless the activity was clearly not criminal, and to sing bodies.		
Standa	rd 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)		
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion is include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.		
voluntee inmates bodies. were any	ers; contra and requi The War she wou	4-2; and interviews with CoreCivic PREA Coordinator, Northwest New Mexico Correctional Center staff, contractors, and actors or volunteers are prohibited from engaging in sexual abuse, and those that do are prohibited to have contact with res they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing den reported that have been no allegations of sexual abuse by contractors or volunteers during the audit cycle and if there all takes appropriate remedial measures, and considers whether to prohibit further contact with inmates. Interviews with plunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.		
Standa	rd 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			

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PREA Audit Report

corrective actions taken by the facility.

Per review New Mexico Corrections Department Policy CD 150100 and New Mexico Corrections Department Policy CD 090100 Inmate Discipline, interviews with Northwest New Mexico Correctional Center staff; inmates are subject to disciplinary sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse; sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories; and considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. New Mexico Corrections Department Policy 090101 provides inmate offense and sanctions for offenses. New Mexico Corrections Department prohibits all sexual activity between inmates and discipline inmates for such activity. In the 12 months prior to the audit there have been no substantiated finding and disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.

New Mexico Corrections Department Policy CD 150100 states a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Per interview with the Mental Health Coordinator, the Mental Health staff would offer counseling, to address the underlying reasons or motivations for the abuse; and would also provide counseling to the victim.

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 and New Mexico Corrections Department Policy CD 150100 requires all new inmates 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 the audit, the audit reviewed the PREA screen, and medical and mental health screen of an inmate having experienced prior sexual victimization and one inmate who previously perpetrated sexual abuse. During the audit, reviewed two PREA screens and medical and mental health records, it was determined inmates who reported prior sexual victimization or previously perpetrated sexual abuse were seen by medical and mental health practitioners within 14 days of the screen. Interviews of case managers who conduct screens, medical and mental health staff confirmed referrals are offered, scheduled and conducted. Majority of the six inmates interviewed who previously experienced prior sexual victimization reported they were offered medical and mental health consultation. Interviews of medical and mental health staff confirmed 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. Informed consent is obtained from inmates before reporting about prior sexual victimization that did not occur in an institutional setting.

Standard 115.82 Access to emergency medical and mental health services

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

	Does Not Meet Standa	ard (requires corrective action)
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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 13-79, and New Mexico Corrections Department policies CD 150100 and 150102 states inmate 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; inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate; and qualified medical practitioners are on duty 24 hours seven (7) days a week. Upon returning from the hospital a nurse evaluates and documents the inmate's health status, and refers the inmate for mental health services. The inmate is prioritized for sick call and if the emergency room does not complete testing sexually transmitted diseases, testing is done at the facility. The auditor reviewed the mental health records of a voyeurism allegation that demonstrated the inmate was referred and provided mental health services for the incident.

Per CCA Policy 14-2 and 13-79, and New Mexico Corrections Department policies CD 150100 and 150102 requires inmate 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. Forensic exams are done for up to 72 hours since the time of the incident. Interviews of staff confirmed they received 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. Victims of alleged sexual assaults are sent to medical, pending transportation to University of New Mexico Medical Center for a forensic examination by SAFE/SANE when necessary. There was no forensic exam in the last 12 months. 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 Policy 14-2 and New Mexico Corrections Department Policy CD.150102 and medical and mental health documentation; and interviews with staff; Northwest New Mexico Correctional Center offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Northwest New Mexico Correctional Center provides victims with medical and mental health services consistent with the community level of care. The facility offers medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse. They will be offered prophylactic treatment and follow-up for sexually transmitted or other communicable diseases, counseling and testing and referred to the mental health staff for crisis intervention as necessary. Treatment is at no costs to the inmates and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning such abuse.

Standards 115.83 (d) and (e) are non-applicable as Northwest New Mexico Correctional Center is a male only facility. Based on interviews and policy, when it was a female facility, female victims of sexual abuse would have been offered pregnancy tests and if pregnancy occurs victims receive pregnancy-related information and medical services.

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 compilance 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.			
better pr lesbian, caused b	a form the event, de gay, bise y other g	2 and 5-1 identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews to e review team uses that addresses whether the allegation or investigation indicates a need to change policy or practice to tect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; kual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise roup dynamics at the institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in ifferent shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff.		
Incident review team members were interviewed and were very knowledgeable of the process. Based on interviews and review of investigations and incident reviews, Northwest New Mexico Correctional Center conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The reviews occur within 30 days of the conclusion of the investigation using CCA Form 14-2F that addresses all elements of the standard.				

The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, stats, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at facility; and they examine the area where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Northwest New Mexico Correctional Center conducts an incident review for all cases, and implements the recommendations for improvement, or shall document its reasons for not doing so.

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 is entered in the Incident Reporting Tracking System on all allegations. The incident based data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The system allows the agency 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. Additionally, they provide the data to New Mexico Corrections

Department for their use.			
CoreCivic does not contract its inmates	to other facilities (115.87 (e)).		
Standard 115.88 Data review fo	or corrective action		
	substantially exceeds requirement of standard)		
Meets Standard (su relevant review per	bstantial compliance; complies in all material ways with the standard for the iod)		
□ Does Not Meet Star	ndard (requires corrective action)		
determination, the audi must also include correc	ding the evidence relied upon in making the compliance or non-compliance tor's analysis and reasoning, and the auditor's conclusions. This discussion ctive action recommendations where the facility does not meet standard. These be included in the Final Report, accompanied by information on specific 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 CCA 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 2015 and 2016 annual report was thorough, provided corrective measures taken and addressed the agency progress in addressing sexual abuse. The 2016 annual report shows an agency wide decline in substantiated staff on inmate sexual assaults and sexual harassment cases and an increase inmate on inmate PREA allegations. The 2016 annual report listed the Northwest New Mexico Correctional Center as New Mexico Women's Correctional Facility. 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 CCA website and can be accessed at http://www.cca.com/security-operations/PREA .			
The PREA section of the website is very informative and easy to locate. 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 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.			
The 2015 and 2016 New Mexico Corrections Department annual reports were reviewed. It was one of the more in-depth report the auditor has reviewed. Northwest New Mexico Correctional Center (New Mexico Women's Correctional Facility) data and information was in the report. The 2016 report includes agency achievements in 2016, aggregate data, agency level data, comparisons from year to year, and facility data and information. Some of the achievements include implementing an electronic PREA incident tracker and data base, dual training between six (6) facilities, and local Rape Crisis Centers, New Mexico Corrections Department partnership with the Transgender Resource Center, Coalition of Sexual Assault Programs and Just Detention International for training.			
Standard 115 90 Data storage	nublication, and doctoration		

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

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

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relevant review period)

Exceeds Standard (substantially exceeds requirement of standard)

Does Not Meet Standard (requires corrective action)

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.

Review of CCA Policy 14-2, CoreCivic website, observation on site, and interviews of staff demonstrated 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, and 2015 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 found in CCA Policy 1-15. 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.

David K. Haasenritter	December 29, 2017
Auditor Signature	Date