

# PREA Facility Audit Report: Final

**Name of Facility:** La Palma Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 05/22/2023

**Date Final Report Submitted:** 10/28/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Jillian Shane	<b>Date of Signature:</b> 10/28/ 2023

AUDITOR INFORMATION	
<b>Auditor name:</b>	Shane, Jillian
<b>Email:</b>	jillianshane@sbcglobal.net
<b>Start Date of On-Site Audit:</b>	04/03/2023
<b>End Date of On-Site Audit:</b>	04/06/2023

FACILITY INFORMATION	
<b>Facility name:</b>	La Palma Correctional Facility
<b>Facility physical address:</b>	5501 North La Palma Road , Eloy , Arizona - 85131
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Christopher Howard
<b>Email Address:</b>	christopher.howard@corecivic.com
<b>Telephone Number:</b>	520-464-3201

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Christopher Howard
<b>Email Address:</b>	christopher.howard@corecivic.com
<b>Telephone Number:</b>	520-464-3201

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Deann Madrid
<b>Email Address:</b>	deann.madrid@corecivic.com
<b>Telephone Number:</b>	O: 520-464-3388

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Crystal Collins
<b>Email Address:</b>	crystal.collins@corecivic.com
<b>Telephone Number:</b>	520-483-2043

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	3240
<b>Current population of facility:</b>	2520
<b>Average daily population for the past 12 months:</b>	1481
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No

<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18-70 and over
<b>Facility security levels/inmate custody levels:</b>	Close/Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	439
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	0
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	10

#### AGENCY INFORMATION

<b>Name of agency:</b>	CoreCivic, Inc.
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027
<b>Mailing Address:</b>	
<b>Telephone number:</b>	6152633000

#### Agency Chief Executive Officer Information:

<b>Name:</b>	Damon T. Hininger
<b>Email Address:</b>	
<b>Telephone Number:</b>	6152633000

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Eric Pierson	<b>Email Address:</b>	Eric.Pierson@corecivic.com
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

#### Number of standards exceeded:

1	<ul style="list-style-type: none"> <li>115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</li> </ul>
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#### Number of standards met:

44
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#### Number of standards not met:

0
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## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-04-03
2. End date of the onsite portion of the audit:	2023-04-06

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Banner Health SACASA

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	3240
15. Average daily population for the past 12 months:	1481
16. Number of inmate/resident/detainee housing units:	9
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

**Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

**Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	2548
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	12
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	7
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	18
<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	9

<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>4</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>5</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>5</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>444</p>
<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>11</p>

<b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	43
<b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	25
<b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	Viewing rosters provided by facility for entire facility and by speciality group, some selected through walkthroughs or inmates who asked to speak during facility walkthrough
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No



<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	Viewing rosters provided by facility for entire facility and by speciality group, some selected through walkthroughs or inmates who asked to speak during facility walkthrough
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	18
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Spoke with PCM and medical, they would not be housed here.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>3</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>1</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>5</p>

<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>1</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>4</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>1</p>
<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>The segregation inmate was not placed in segregation for that purpose, he was selected from segregation roster and asked general questions about how he was placed there (or all inmates typically) and the process, if he had heard this, privacy questions, searching and staffing questions, etc</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>25</p>

<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>rosters from shift and HR were used</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>34</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>79. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	food service, volunteer coordinator, food service, mailroom, classification, grievance, maintenance, training
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	2
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.
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**SITE REVIEW AND DOCUMENTATION SAMPLING**

**Site Review**

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<b>84. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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**Was the site review an active, inquiring process that included the following:**

<b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>No text provided.</p>
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**Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p><b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>
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**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

**Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

**92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	1	0	1	0
<b>Staff-on-inmate sexual abuse</b>	1	1	1	1
<b>Total</b>	2	1	2	1

**93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:**

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	1	1	1	1
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	1	1	1	1

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

#### 94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	1	0	0	0
<b>Total</b>	0	1	0	0	0

#### 95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	1	0	0
<b>Staff-on-inmate sexual abuse</b>	0	1	0	0
<b>Total</b>	0	1	0	0

### Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual harassment</b>	0	1	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Total</b>	0	1	0	0	0

**97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	1	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	1	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

**98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:**

2

<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	Every investigation noted by the facility was reviewed, therefore, some sample types were not applicable as they were not available.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</b>	1

## Non-certified Support Staff

**116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other



<b>Standards</b>
<b>Auditor Overall Determination Definitions</b>
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>
<b>Auditor Discussion Instructions</b>
<p>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.</p>

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>115.11 (a): Agency Policy Supplement (APS) 125-APS, Sexual Offense Reporting states that CoreCivic and the Arizona Department of Corrections, Rehabilitation and Reentry (ADCRR) have zero tolerance toward all forms of sexual abuse and sexual harassment.</p> <p>125-APS states that CoreCivic and the Arizona Department of Corrections, Rehabilitation and Reentry (ADCRR) have a zero tolerance toward all forms of sexual abuse and sexual harassment. Inmates who sexually abuse other inmates will be disciplined and may be subject to criminal prosecution. Inmates victims of sexual abuse or harassment will be provided with a supportive and protective environment. Regardless of consensual status, sexual activity between inmates and employees, contractors or volunteers is strictly prohibited and is subject to administrative and criminal disciplinary sanctions. It is CoreCivic policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incident of sexual abuse that are criminal</p>

115.11 (b): the APS states that CoreCivic has designated a Senior Director, PREA Compliance and Programs to be the agency PREA Coordinator. This upper-level management Facility Support Center employee is responsible for development, implementation, and oversight of CoreCivic efforts to comply with PREA Standards and the agency Sexual Abuse Response and Prevention Program. He provides supervisory oversight to all CoreCivic facilities ensuring coordination in the prevention, detection, interventions, investigation, and disciplinary/prosecution of sexual abuse as outlines in this policy.

115.11 (c): APS states that the facility has a designated PREA Compliance Manager to coordinate efforts at the facility level to comply with PREA Standards. This position is an Administrative Duty Officer level manager appointed by the Warden who maintains responsibility for the facility's Sexual Abuse Response and Prevention Program.

An interview as well as numerous informal discussions were conducted with the PREA Coordinator (PC) for the Agency. He was extremely knowledgeable about his roles and responsibilities, the standards, the policy and the things performed operationally for this facility and the Agency. He indicated that he feels that he has proper authority and time to complete the duties which could also be seen by the response from staff, the documents reviewed and the processes in place.

An interview as well as numerous informal discussions were conducted with the PREA Compliance Manager (PCM) for the facility. She was extremely knowledgeable in her duties and the role of the position, despite being in this role for a short period of time. CoreCivic management stated that additional training, education and meetings would also be forthcoming. In addition, the QAM as well as numerous other high level staff were engaged, knowledgeable and able to support the PREA functions.

For this standard, the facility received an exceeds standard. The PCM and PC, as well as the Quality Assurance Staff at this facility have received training and conduct training, above and beyond the standard to ensure that the zero-tolerance policy is known throughout the facility and agency. The PC, Senior Director and Director of PREA at the agency level for CoreCivic, displayed involvement and education well above all requirements; have developed trainings, education, information, and authority due to their involvement with all other disciplines that the PREA standards cover and their knowledge. Each are DOJ PREA certified auditors as well demonstrating their knowledge and committee to zero-tolerance throughout the agency and operations at this facility.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Prisons and Jails PREA Standards Compliance Checklist
- Agency Policy Supplement (APS) 125-APS, Sexual Offense Reporting
- Organizational Chart for CoreCivic Correctional Programs Division
- Job Description of the Senior Director, PREA Programs and Compliance

	<ul style="list-style-type: none"> <li>• HR Email Announcing PREA Audit &amp; Compliance Senior Director</li> <li>• Email introducing the Director of PREA Compliance and Investigations</li> <li>• CoreCivic Summary of Current Job Performance Characteristics for Senior Director of PREA Programs and Compliance</li> <li>• Interview of PREA Coordinator for CoreCivic (Senior Director) Interview of PREA Compliance Manager</li> <li>• Organizational Chart</li> <li>• Memo</li> </ul>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A contract with the AZ Department of Corrections was entered into with CoreCivic. It states, in part, that CoreCivic has read, understands, and shall comply with the Sections and Subsections identified herein.</p> <p>Staff at the facility currently receives and will continue to receive training on PREA during Pre- Service and In-Service training. CoreCivic will not tolerate conduct sexual violence/misconduct and will investigate all allegations regardless of source. It is CoreCivic’s policy to aggressively investigate and prosecute those who are involved in incidents of sexual violence and to provide a supportive and protective environment for the alleged victim. CoreCivic policy provides a mechanism for compliance with the Prison Rape Elimination Act (PREA).</p> <p>CoreCivic takes its responsibility to prevent sexual abuse of inmates very seriously. To ensure that appropriate housing, program and work assignments are made, inmates are screened within twenty-four (24) hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Inmates identified as high risk with a history of sexually assaultive behavior will be referred to Health Services for evaluation by a mental health or other qualified professional. Inmates who are determined to be potentially vulnerable to sexual assault or who are at a high risk of being sexually assault will be housed appropriately to minimize sexual abuse/assault risk.</p> <p>Inmates with a history of sexually assaultive behavior and/or inmates at risk for sexual victimization will continue to be monitored and counseled throughout the duration of their incarceration at the facility.</p> <p>Inmates may report incidents of sexual abuse/misconduct/harassment to any employee. Any report or alleged report of sexual abuse/misconduct/harassment will be taken seriously and immediately reported to the Warden. An incident report (called a 5-1 packet) will be initiated in accordance with CoreCivic policy. Any time a report of</p>

	<p>sexual abuse/misconduct/harassment is received, a complete investigation will be ordered by the Warden to determine the validity of the report. Results of the investigation shall be documented and remain confidential.</p> <p>Employees/civilians are prohibited from engaging in sexual conduct with inmates, regardless of consensual status. Any employee/volunteer/contract staff in violation will be subject to administrative and criminal charges. Inmates engaging in sexual conduct with other inmates will be subject to disciplinary sanctions within the realm of the facility disciplinary system in addition to any criminal charges that may exist.</p> <p>Any information obtained through the investigation will only be released in accordance with the laws of the jurisdiction and contract requirements.</p> <p>A case file will be developed for all reports of sexual abuse/misconduct/harassment. The case file shall include, but not be limited to, the following documentation:</p> <p>Incident reports;  Investigative reports;  Inmate information;  Case disposition;  A complete copy of the corresponding 5-1 packet;  Medical evaluation findings;  Counseling evaluation findings; and  Recommendations for post-release treatment and/or counseling.</p> <p>A memo was provided in the file from the Warden which states that CoreCivic is a private provider and does not contract with other agencies for the confinement of those in their care.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• Prisons and Jails PREA Standards Compliance Checklist</li> <li>• Interview with Vice President Operations Administration</li> <li>• CoreCivic Contract with AZDOC</li> </ul>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a) APS stated that the facility, in coordination with CoreCivic FSC, will develop an annual staffing plan that provides for adequate levels of staffing to protect inmates against sexual abuse. The location of video monitoring systems will be considered when determining adequate</p>

levels of staffing. In calculating staffing levels and determining the need for video monitoring, the following factors will be take into consideration:

- i. Generally accepted detention and correctional practices;
- ii. Any judicial findings of inadequacy;
- iii. Any findings of inadequacy from federal investigative agencies;
- iv. Any findings of inadequacy from internal or external oversight bodies;
- v. All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated);
- vi. The composition of the inmate population;
- vii. The number and placement of supervisory staff;
- viii. Institutional programs occurring on a particular shift;
- ix. Any applicable state or local laws, regulations, or standards;
- x. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- xi. Any other relevant factors.

The facility provided and the auditor reviewed the 2022 and 2021, 14-02 Staffing Plan reviews and saw that the facility assessed, determined, and documented whether adjustments are needed to the staffing plan, whether adjustments are needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

(b) APS states that the facility will make its best effort to comply on a regular basis with the approved PREA Staffing Plan. The Chief of Security is responsible for reviewing the PREA Staffing Plan in conjunction with the daily shift roster. If a position identified on the Staffing Plan is vacated for a shift, the Chief of Security will notify the PREA Compliance Manager of the deviation.

During the audit review period, the facility stated that there has been no (zero) instances in which they were required to deviate from the staffing plan.

(c) APS states that following consultation with the facility staff, the FSC PREA Coordinator shall assess, determine, and document whether adjustments are needed to:

- The staffing plan established pursuant to this section;
- The facility's deployment of video monitoring systems and other monitoring systems and other monitoring technologies; and
- The resources the facility has available to commit to ensure adherence to the staff plan.

The facility provided and the auditor reviewed the 2021 and 202, 14-02-I Staffing Plan Review and saw that the facility assessed, determined, and documented whether

adjustments are needed to the staffing plan, whether adjustments are needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

(d) APS states that Intermediate level and/or upper level facility supervisors will conduct unannounced facility rounds to identify and deter staff sexual abuse and sexual harassment. The occurrence of such rounds will be documented as an unannounced round or "PREA Round" in the applicable log (e.g. ADO, post log, shift report, etc.) This practice will be implemented for night shifts as well as day shifts and through all areas where inmates are permitted.

The facility indicated that there were no instances in which they deviated from the staffing plan during the review period. While on site, supervisors and the PCM indicated that they were aware of the requirements and process to document and report this.

The auditor spoke with the maintenance staff member who was also in charge of the facility cameras. He stated that at that time, all cameras were operational and that he was able to fix them or work with the vendor to fix them quickly should there be an issue. He provided the auditor with a print out of all 249 camera names and locations. In addition, the auditor had investigative staff flip through the cameras so the auditor could verify that inmates still had privacy from opposite gender viewing and that the blind spots mentioned were covered.

The Auditor noted that supervisor rounds in the housing unit are documented in the log as "PREA Rounds" even when the purpose may be for a reason other than PREA. The Standard states that "the facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment." When questioned by the Auditor supervisors could not identify this as the purpose of "PREA Rounds."

For Corrective Action, Supervisors, including ADO Staff will sign an acknowledgment that they have read Standard 115.13 and understand the purpose of "PREA Rounds". All staff required were trained and signed a 4-2A, indicating as such on the requirements of this standards. Subsequent calls and interviews demonstrated that ADO level staff understood as they were trained.

Documents Reviewed, Interviews Conducted, and Observations that helped the Auditor reach finding:

- Prisons and Jails PREA Standards Compliance Checklist
- Annual PREA Staffing Plan Assessment Supervisor Interviews
- PCM interview
- Walkthrough of physical Plant Review of Cameras

	<ul style="list-style-type: none"> <li>• Physical Plant Diagram</li> <li>• Staffing Plan</li> <li>• Log Books</li> </ul>
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<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) (b) (c) This facility does not house youthful offenders.</p> <p>The facility advised the auditor, in writing, that no youthful offenders are housed at this facility. The auditor requested and was provided a roster of all inmates with their dates of birth and verified that there were no youthful offenders. Interviews with staff were help and when asked, staff indicated that there has not been an instance in which a juvenile was housed at the facility.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• Prisons and Jails PREA Standards Compliance Checklist</li> <li>• Sexual Abuse Prevention and Response Roster of Inmates with DOB</li> <li>• Interviews with Warden, PC and PCM</li> <li>• Interviews with Staff</li> </ul>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS States that Cross-gender inmate strip searches (male staff on female inmate, or, female staff on male inmate) will not be conducted except in exigent circumstances.</p> <p>(b) The provision is not applicable, as the rated capacity does exceed 50 inmates. APS states that Pat searches of female inmates by male staff are prohibited except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order). In addition, it stated that pat searches of male inmates by female staff are permissible if no male staff member is available to conduct the search within a reasonable amount</p>

of time.

(c) APS states that Pat searches conducted by a staff member who is not the same gender as the inmate will be conducted in the presence of at least one additional staff member, whenever possible. This does not apply to searches of Transgender/Intersex inmates. The process for searching Transgender/Intersex inmates can be found in section J.11. of this APS. Whenever a cross-gender pat search of a female inmate, or a cross-gender strip search of any inmate does occur, the search will be documented. Documentation will be in a log maintained by the facility and in a 5-1B Notice to Administration (NTA) in accordance with CoreCivic Policy 5-1 Incident Reporting. Details of the exigent circumstances must be included in all log entries and 5- 1B Notices.

(d) APS states that staff of the opposite gender are required to announce their presence when entering an inmate housing unit. Where a larger housing unit is broken into several individual smaller units such as pods, cell-blocks, dorms, etc. the staff member must announce as he/ she enters each of the smaller individual units.

a. A verbal announcement upon arrival is required only when the status quo of the gender-supervision on the housing unit changes from exclusively same gender, to mixed- or cross-gender supervision. For example, a female correctional officer entering a housing unit is not required to announce if there is already a female correctional officer in the unit.

b. In the event multiple opposite gender staff enter a housing unit simultaneously, only one of the opposite gender staff need make the announcement.

c. Announcements are required for both security and non-security staff.

d. It is not acceptable to announce only at the beginning of a shift.

e. Staff roving from one pod/dormitory to another inside of a larger unit must re-announce each time they enter.

The facility will post notices/rules that prohibit inmates from disrobing or being unclothed in common areas. Cameras focused on common areas, including dormitory sleeping units, may be monitored by either gender.

Cameras that capture areas in which inmates are likely to be undressed or toileting, such as showers, bathrooms, or inside cells, should only be monitored by officers or nonmedical administrators of the same gender as the inmates viewed through the camera. These areas may be digitally obscured and monitored by either gender.

(e) APS states that the facility will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. 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.



(f) APS states that all searches of transgender and intersex inmates will be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

- i. Requiring two staff to search transgender inmates is more intrusive than necessary.
- ii. "Dual searches" where two different gendered staff search different parts of an inmate's body are not acceptable.
- iv. Requests for transgender inmates to remove appearance related items such as prosthetics, clothing that may convey gender identity, wigs, and cosmetics will be consistent with requirements for the removal of similar items for other non-transgender/intersex inmates.
- v. Strip searches of transgender/intersex inmates will be made in a manner designed to ensure as much privacy to the inmate as practical. Staff should consider the physical layout of the institution, and the characteristics of a transgender/intersex inmate to adjust conditions of the visual search as needed for the inmate's privacy.

During the walkthrough of the facility, on the entry doors to the housing areas, signage which stated "staff of the opposite gender must announce themselves upon entry". In addition, staff announcements were observed by the auditor while on the site visit and were loud enough for inmates throughout to hear. Lastly, formal and informal interviews with staff and inmates indicated that this process occurs consistently and every time staff of the opposite gender enter the units and housing areas. Shower curtains and areas where inmates may be in states of undress included curtains and privacy barriers. During a review of the cameras in the control stations and with the individual in charge, it was observed by the auditor that no cameras could view toilet or shower areas and inmates were given privacy in their rooms to change clothing without risk of being viewed by members of the opposite gender.

The facility indicated on the PAQ that in the past twelve months, there have been zero cross gender strip or cross gender visual body cavity searches of inmates.

Informal and formal interviews, held with both staff and inmates were held by the auditor. All inmates stated that announcements were constantly being made for female staff entering the units (some inmates even stated that they are done too often). Staff interviews indicated that staff were completing these announcements each time they enter a housing area and many of the staff even made comments that this process is almost second nature.

Documents Reviewed, Interviews Conducted and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- 125 APS
- Lesson Plans for Various Searches
- Interviews with Random and Specialized Staff

	<ul style="list-style-type: none"> <li>• Interviews with Inmate Population</li> <li>• Camera Reviews</li> </ul>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) APS states that the facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility and agency efforts to prevent, detect and respond to respond to {sic} sexual abuse and sexual harassment. Inmates who are deaf or hard of hearing shall have access to information through simple written or oral communication. Sign language interpreters, or auxiliary aids such as a TTY that are reasonable, effective, and appropriate to the needs of the inmate shall be provided when simple written or oral communication is not effective.</p> <p>(a) Policy goes on to state that the facility will ensure that information is effectively communicated orally, on an individual basis, to inmate with limited reading skills. In the event an inmate has difficulty understanding provided inmate and/or procedures due to intellectual deficiencies or mental health concerns, the facility will ensure that such information is effectively communicated orally to such inmates on an individual basis.</p> <p>(b) APS states that the facility shall take reasonable steps to ensure meaningful access to all aspects of the facility and agency efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are Limited English Proficient (LEP). Interpreters shall be provided who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.</p> <p>For those inmates/inmates who are limited English proficient with Spanish as a primary language, a flier entitled "Sexual Assault Awareness and Prevention" is available in both English and Spanish. This flier is educational and outlines the PREA education requirements to the inmate population.</p> <p>The receiving and discharge acknowledgment which included the handbook acknowledgment is also available in both English and Spanish.</p> <p>The video, called PREA: What you need to know, is available in English, Spanish and Hmong.</p> <p>The inmate handbook was provided and reviewed, with all required education</p>

materials for PREA.

A contract between Language Lines Services, Inc. and CoreCivic of Tennessee, LLC. was provided to and reviewed by the auditor. The contract provides for over-the-phone services for translation and was last executed on April 11, 2019. It provides for interpretation services in over 200 languages. In addition, the facility can use LanguageLine Insight Video Interpreting which has 1 demand access in the 36 top languages, Spanish and American Sign Language interpreters available 24/7/365.

(c) APS states that inmates will not be relied upon to provide interpretation services, act as readers, or provide other types of communication assistance, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's/inmates safety, the performance of first-responder duties, or the investigation of the inmate's allegations.

In the past twelve (12) months, the facility indicated that there were no instances where inmate interpreters, readers or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety.

An interview with CoreCivic Vice President, Operations Administration was conducted, and he indicated that the CoreCivic corporate office aids facilities that enable them to locate potential vendors and/or agencies that would provide support services for inmates/inmates with disabilities. The agency maintains a comprehensive contract with the Language Line and some when have an MOU with organizations in the local communicates to provide translation services when needed. TTY phones are provided, and arrangements are also made to assist those inmates/inmates who are blind.

At the time of the audit, there were no inmates who were blind, with low vision, deaf or with cognitive deficits. MH staff would be used to assist in reading to inmates, should an inmate need help understanding the materials or have reading or vision difficulties. The auditor selected two inmates who spoke other languages and conducted interviews with them, utilizing the language line. In each instance, the auditor had a unit staff member call the line, in an effort to ensure they understood the process and could locate the number and in each instance, it worked and the line was used to conduct the interview.

While onsite, the auditor selected three inmates to interview who could possibly need the assistance of the language line (each did speak some English). The auditor took these inmates into a secure and private office, and asked the unit staff and officer assigned to those areas to call the line for its use. Staff knew of the flier but were unable to quickly find the flier with the access code and we together called the line and used it for its services to conduct the interviews. This was eventually located and the line was used to interview the inmates. The auditor recommended that management re-send out the flier and ensure it is located in shift supervisors offices, unit staff offices, intake, and medical/mental health offices, which the facility immediately did.

Informal and formal interviews with staff indicated that they were aware of this

	<p>service and how to access this line.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• 125 APS</li> <li>• Sexual Assault Awareness and Prevention Brochure (English and Spanish) Inmate Handbook</li> <li>• Language Line contract and flier</li> <li>• Video PREA: What you need to know</li> <li>• Interview with Inmate with use of the Language Line</li> <li>• Interview with CoreCivic Vice President, Operations Administration Handbook for those with limited vision</li> <li>• Use of Language Line with Inmate</li> <li>• Random Staff Interviews</li> <li>• Memo</li> </ul>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that to the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have contact with inmates/inmates and decline to enlist the services of any contractor who may have contact with inmates/inmates who:</p> <ol style="list-style-type: none"> <li>1. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC 1997);</li> <li>2. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent or refuse; and</li> <li>3. has been civilly or administratively adjudicated to have engaged in the activity as outlined above.</li> </ol> <p>(b) APS states any incident of sexual harassment shall be considered in determining whether to hire or promote any individual, or to enlist the services of any contractor, who may have contact with inmates.</p> <p>The authorization for security clearance form states 'I understand omission of any item may result in not receiving full consideration for employment'. This form is signed by every applicant.</p>

(c) (d) (e) Before hiring new employees or enlisting the service of any contractor who may have contact with inmates, CoreCivic will ensure that a criminal history record check has been conducted. In addition, CoreCivic will ensure that criminal history record checks are conducted at least every five years for current employees and contractors who may have contact with inmates, or, have in place a system for otherwise capturing such information.

Consistent with federal, state, and local law, the facility will make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse as defined by this policy. The CoreCivic 3-20-2B PREA Questionnaire for Prior Institutional Employers form will be used to obtain prior employment information related to PREA.

(e) APS states that CoreCivic shall ensure that criminal history record checks are conducted at least every five years for current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

(f) APS states that all applicants, employees, and contractors who may have direct contact with inmates, will be asked about previous misconduct, as outlined above in section B.1. The CoreCivic 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form, or equivalent contracting agency form, will be completed as part of the hiring process. The CoreCivic online application section that requires disclosure of misconduct as described in B.1. may be utilized in lieu of the 14-2H for new applicants.

The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form will be completed by employees as part of the promotional process including both inter-facility promotions and intra-facility promotions.

The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form will be completed by current employees and contractors on an annual basis to serve as verification of the fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as described in this policy. The annual signature will be in lieu of having the form completed as part of an annual review process. The completed 14-2H form will be retained in each employee's personnel file.

(d) and (e): During an interview with the Human Resource Manager, the auditor was provided a list of the current twenty-four (24) contractors who are currently at the facility. The HR Manager stated that these workers are in medical and food service and each go through the same hiring process as all other staff. For each contractor, HR provided their clearance form demonstrating that each was cleared. These are maintained in a file in HR for each contractor.

Forty staff members from all disciplines and from various lengths of employment were selected to be reviewed by the auditor for compliance with this standard. Of those 40, each file contained a background check, a self disclosure form, and twenty five that required a PREA Questionnaire for Prior Institutional employers included this

	<p>documentation, as required by the standard.</p> <p>After an interview with HR Staff, a blank hiring packet was provided which shows all that staff complete during the hiring process. This includes: Self-Declaration of Incarcerated Friends, Family or Acquaintances; AZ Policy Psychology Evaluation; Self-Declaration of Domestic Violence Conviction; Self-Declaration of Sexual Abuse/Sexual Harassment; Verification of Former Employment; PREA Questionnaire for Prior Institutional employers; AZ Background Questionnaire; and additional non-PREA Audit related forms.</p> <p>The HR Manager provided the auditor with a prior institutional background check from, sent from a different facility, for her to verify and detailed the process for the audit. She indicated that with the release form, they would always cooperate with outside agencies/facilities.</p> <p>Volunteers and contractors also go through a background check and sign the same documentation as employees. In addition, they go through training prior to being granted access. The front desk officer was asked about this process and how they were aware of who was 'cleared' to enter the facility. They front desk showed the auditor a badge and what would happen should an active volunteer swipe into the facility.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• New Hire Paperwork Samples</li> <li>• Promotion Paperwork Sample</li> <li>• 14-02H Self-Disclosure/Declarations Form</li> <li>• Final Approvals</li> <li>• Background Investigation Disclosure and Authorization Form</li> <li>• Interviews with PCM, PC, HR Staff, Volunteer Coordinator</li> </ul>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>(a) The facility indicated to the auditor by memo and during discussions that during the past twelve (12) months, there have been no substantial expansions or modifications to the facility.</p> <p>APS states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion, or modification on the company's ability</p>

to protect inmates from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations.

A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations.

(b) APS states that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how much technology may enhance the ability to protect inmates/inmate from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations.

A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations.

The CoreCivic Vice President of Operations Administration states that CoreCivic employs architects and other professionals who through experience, research and consulting have knowledge of the issues and needs presented by PREA. On new builds and renovations, the design staff will consult with the PREA coordinator for recommendation and work to ensure that PREA is addressed. Real estate and design staff receive information from the field on privacy concerns in areas such as showers, restrooms, and any areas where inmates/detainees may be in a state of undress.

Blind spots are identified that can be corrected through video surveillance coverage.

During acquisitions, the staff making the site visits develop a preliminary assessment and the PREA coordinator is involved in the review of physical plant issues. At existing facilities, a form 7-1B (PREA Physical Plant Considerations) issued to ensure PREA is considered when initiating a renovation/new construction.

In addition, the VP states that cameras are used to support direct and indirect staff supervision. Better quality systems have been installed and consideration to optimal coverage is addressed at the time of these upgrades. Camera placement also takes into consideration the privacy needs for cross gender viewing in areas like restrooms and shower areas. Technology is also discussed with the facility during the PREA Staffing Plan assessment that is reviewed each year by facility staff and the FSC PREA coordinator.

The auditor completed a walkthrough of all facility grounds and saw cameras in place throughout the facility. In numerous locations, the auditor sat with staff to review all camera angles. In addition, the auditor was provided a printout of all cameras. There has not been a camera or building upgrades since the previous audit. Each camera allowed for coverage and aimed to eliminate blind spots. No cameras were seen to have a view of restrooms or shower areas.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

	<ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• 125 APS</li> <li>• Policy 7-01B Form for plant physical assessment and improvement Interview with PC</li> <li>• Interview with PCM</li> <li>• Facility Walk through</li> <li>• Interview with Agency Head</li> <li>• List of all facility cameras</li> </ul>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) CoreCivic policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate/inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate/inmate to be transported to the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease.</p> <p>(b) The AZDOC conducts the criminal sexual abuse investigations at the facility. The protocol outlined by the facility and in documentation has been adapted from and is based on the most recent edition of the US Department of Justice’s Office on Violence Against Woman publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents”.</p> <p>(c) According to the PAQ, there were no SANE exams conducted during the review period.</p> <p>(d) and (e) Banner Medical uses advocates from Against Abuse, Inc for services for SANE exams, and stated that an advocate would be automatic should a SANE be initiated. They stated that no MOU is necessary. Discussions with Against Abuse by the auditor via telephone also demonstrated that they would assist, through SANE or for other advocacy, any survivor requesting assistance.</p> <p>APS states that If it is determined that an examination is necessary for the collection of evidence, then the facility will transport the alleged victim. If a SAFE/SANE provider is not available, the examination may be performed by other qualified medical practitioner</p> <p>Banner Health stated that they would not enter into an MOU regarding SAFE/SANE, as it is not their practice to do so. However, staff contacted stated that should an inmate need services of a SANE examination, they would absolutely complete the</p>



exam as they would for any victim who was not incarcerated, by their trained professional staff.

An MOU does exist with CoreCivic and HonorHealth which states that HonorHealth will:

- Respond to requests from Facilities to provide a SANE for comprehensive care; prophylaxis treatment for sexually transmitted disease; timely collection of forensic evidence; forensic photography and testimony, if necessary, in sexual assault cases of Facilities inmates. In addition, Agency will facilitate advocacy services as needed;
- obtain patient consent before conducting any any part of the medical/forensic examinations;
- maintain confidentiality as required by Agency policy/protocol, HIPAA, and Board of Nursing directives; and
- communicate any questions or concerns to the Facility PREA Coordinator.

(f) APS states that investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity (i.e. state or local law enforcement, contracting agency, etc) comply with these regulations.

(g) Auditor is not required to audit this provision.

(h) Policy states that if unable to secure services of a victim advocate to accompany the alleged victim to the SAFE/SANE exam, and if requested by the victim, the facility may use a qualified facility staff member for this purpose. The staff member must have been screened by SART and the Warden for appropriateness to serve in the role and must have received documented education concerning sexual assault and forensic examination issues.

An advocate was called by the auditor prior to arriving onsite. They described their processes and involvements with the facility and protocol should an incident occur.

Administrative Investigations are completed onsite by CoreCivic Staff.

AZ DO-608, Criminal Investigations states:

In instances where the CIU independently receives an allegation of sexual assault/abuse from a victim, third party, or anonymous source, the CIU shall:

Notify the affected unit.

Cause the initiation of an SIR, which provides a brief synopsis of the allegation, with the Central Office Communications Center.

In all cases, CIU shall place the SIR number in the "Comments" section of the Criminal Investigations Bureau face sheet.

Sexual Assault Medical Examinations - The use of outside forensic examination services (i.e., Sexual Assault Nurse Examiner (SANE), etc.) are authorized during the course of investigations involving sexual assaults.

Cost incurred for outside forensic services are billed in accordance with A.R.S. §13-1414, Expense of Investigations. Any medical expenses arising out of the need to secure evidence that a person has been the victim of a dangerous crime against children as defined in A.R.S. §13-705 or asexual assault shall be paid by the county in which the offense occurred. Obligation to report under this standard shall terminate if the inmate victim is released from custody.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- DO 608
- 125 APS
- Policy 13-79 Sexual Assault Response with 13-17A Sexual Assault Protocol Investigation Outline and Protocol
- Sample Incident Report
- Uniform Evidence Protocol
- A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents
- Interview with PCM, Advocates, custody staff, PC
- MOU with HonorHealth

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS stated that the Warden will ensure that an administrative investigation and/or a referral for a criminal investigation, is completed for all allegations of sexual abuse and sexual harassment.</p> <p>(b) APS states that all allegations of sexual abuse and sexual harassment will be referred for investigation to the ADCRR Criminal Investigations Unit (CIU). That agency investigative process as outlined in ADCRR DO 125 Section 6.0 and DO 608 Criminal Investigations will be followed for allegations of sexual abuse.</p>

	<p>This information is readily available on the CoreCivic Prison Rape Elimination website with links to policy and the standards.</p> <p>(c) The facility has entered into an MOU with the Eloy Police Department, which was executed in 2016. This MOU states that the investigating agency will follow the protocols, including collection of evidence, as established by local law enforcement standards.</p> <p>(d) Criminal investigations shall be documented in a written report that contains a thorough description of physical testimonial and documentary evidence and that includes copies of all documentary evidence where feasible.</p> <p>During an interview with the CoreCivic Vice President, Operations Administration, he stated that it is policy to refer all allegations of sexual abuse that are criminal in nature to law enforcement agencies with the legal authority to conduct criminal investigations. All administrative investigations are conducted by CoreCivic investigators who have received the specialized PREA training and/or law enforcement officials. In addition, the VP stated that all allegations are reported in the CoreCivic Incident Reporting Database (IRD) system which triggers an investigation. This system requires multiple levels of administrative oversight and review. All allegations that could result, if substantiated, in criminal violations are referred to the appropriate law enforcement officials (or by contracted partner investigative entity). Our staff works with the outside law enforcement, upon request.</p> <p>According to the PAQ and logs, two investigations were completed in the twelve month preceding the audit.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• CoreCivic PREA Statement</li> <li>• PREA Allegation Log</li> <li>• PREA Allegation Administrative Investigation CoeCivic Website</li> <li>• Interview with Specialized Staff</li> <li>• Interview with PREA Compliance Manager</li> <li>• Interview with PREA Coordinator</li> <li>• Interview with CoreCivic Vice President, Operations Administration</li> </ul>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) APS states that All CoreCivic facility employees will receive comprehensive

training on preventing, detecting and responding to sexual abuse and sexual harassment in accordance with section 10 of ADCRR

Department Order (DO) 125 Sexual Offense Reporting.

(b) APS states that training should be tailored to the gender of the inmates at the facility and it also states that employees transferring to a facility that houses a population whose gender is different from their previous facility, shall receive additional training specific to the population of the newly assigned facility.

(c) APS states that each employee and contractor will receive annual In-Service refresher training on the agency's current sexual abuse and sexual harassment policies and procedures.

The facility provided the auditor with an employee roster listing all current staff, position name and date of hire.

A roster of all facility staff was provided to the auditor. Forty employee names were selected to be reviewed by the auditor, at random, from various shifts, ranks and positions, custody and non-custody.

(d) APS states that employees will be required to confirm, by either electronic or manual signature, their understanding of the training that they have received. At Pre-Service Training and annual In-Service Training, each employee and contractor will be required to sign ADCRR Form 125-3, Prison Rape Elimination Act (PREA) Training Acknowledgement.

Staff who were interviewed of all levels, both formally and informally, were able to answer detailed questions about the requirements of the training.

Forty staff members from all disciplines and from various lengths of employment were selected to be reviewed by the auditor for compliance with this standard. Of those 40, 26 were missing signed acknowledgments verifying that they understood the training they received. The staff were signing a sign in roster and were all trained but it was not on the correct documentation. All were trained in the past year, as the facility had recently entered into a new contract with the Arizona Department of Corrections which required new training for all staff. Staff were signing a AZDOC form entitled *Training Roster* and it only indicates that they went through *Module 5*. *Prior to March of 2023 staff were not signing the ADCCR Form 125-3 PREA Training Acknowledgment at Pre-Service Training. The ADCCR Form 125-3 includes the required statement that the employees understand the training that they have received.*

Training PowerPoints and Lessons plans were provided to the auditor to review. This included topics such as searches, the law and role as a correctional officer, searching transgender and intersex inmates, reporting, first responder duties and all other elements of this standard.

For Corrective action, The ADCCR Form 125-3 will be utilized for all employees in current academy and training classes and those going forward. All existing employees

	<p>will sign this form during their next Pre-Service Training and all subsequent classes. As the classes are completed the auditor will be provided with ADCCR 125-3 for that class.</p> <p>PREA training documentation should be filed in individual employee training files instead of binders based on class number.</p> <p>For corrective action, the facility located each of the training verifications and sent proof completion for all selected staff; those originally selected and some newly randomly selected by the auditor. In addition, the facility training manager indicated that all documents were located and filed in the correction location of the employees individual files.</p> <p>Documents Reviewed, Interviews Conducted and Observations that helped auditor reach finding:</p> <ol style="list-style-type: none"> <li>1. PREA Standards Compliance Checklist</li> <li>2. Training Policy</li> <li>3. COTA Training Powerpoint and Lesson Plan</li> <li>4. CoreCivic PREA policy Acknowledgement</li> <li>5. Staff Roster</li> <li>6. In-Service Training Records</li> <li>7. Random Staff Interviews</li> <li>8. HR Files</li> <li>9. Training Files</li> <li>10. Discussion with training and HR Staff</li> <li>11. Interview with PCM, HR, Training, Random and Specialized Staff</li> </ol>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that all volunteers and contractors who have contact with inmates/ inmates shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment prevention, detection, reporting and response as outlined in this policy.</p> <p>Each volunteer receives a manual that of which covers sexual abuse and sexual harassment. The manual was provided to the auditor to review and includes: the various definitions of acts from PREA, sexual abuse awareness, zero-tolerance policy, safety, PREA requirements, reporting by inmates, and reporting to staff. They also receive the handout entitled PREA Overview: Training for Contractors and Volunteers.</p>

(b) APS states the level and type of training provided to volunteers and contractors will be based on the services they provide and level of contact they have with inmates. All volunteers and contractors who have contact with inmates will acknowledge the CoreCivic zero-tolerance policy regarding sexual abuse and sexual harassment and information on how to report such incidents.

All volunteers and contractors will be required to sign the 14-2J CoreCivic Zero Tolerance Policy Acknowledgment form. Five (5) signed samples of this form were provided to/reviewed by the auditor.

(c) APS states that the signed documentation confirming that each Volunteer or Contractor understands the training that he/she has received will be kept in the volunteer or contractor's file by either the Learning Development Manager, facility Volunteer Coordinator or other staff designated by the Warden or PREA Compliance Manager.

The facility provided the auditor with a list of all contract staff or contractors at the facility. All work in food service and the medical departments.

Additional documentation was provided from another facility that trained additional volunteers. This documentation was only a 4-2A, training roster which indicated that volunteer training was completed but did not specify which training was conducted nor did this contain documentation that they understand the training that they received.

After a review of the documentation, it was seen that the facility had inconsistent lists of volunteers. Only 2 of 11 volunteers had any documentation of PREA Training. None of the volunteers were signing the 14-2J and 14-2K Forms required by CoreCivic Policy through the APS to document Training and acknowledgment of the PREA Zero Tolerance Policy.

One volunteer was interviewed while onsite. She recalled the training provided, the background check process, and was aware of the zero-tolerance policy and how to report. Lastly, she expressed that security staff were excellent to work with and she feels they would take her seriously if she had concerns. Informally, three volunteers were also spoken with while the auditor was onsite, as they had all just arrived together. Each said the staff were wonderful, they felt safe at this facility, knew how to report, and that they were trained prior to starting.

An interview was also held with the HR Manager and the same packet was provided and described, as above, as being needed for each volunteer and contractor.

HR provided a list of contract staff to the auditor, of which samples were selected to ensure they had completed the required training. Each selected had documentation of the required training.

As corrective action, the volunteer coordinator made files for each volunteer cleared

to enter the facility and added documentation from neighboring facilities, as many volunteers were cleared and trained by those facilities. He stated that he will continue to maintain documentation for each and verify completion. All were forwarded to the auditor to show completion, during the corrective action period.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- 125 APS
- PREA Overview, Training for Contractors and Volunteers
- PREA Overview PowerPoint
- Volunteer Manual
- List of Contractors
- Volunteer Application Form
- Self-declaration of Sexual Abuse/Sexual Harassment Volunteer Acknowledgement of PREA training
- Volunteer List with Organization and start date
- Volunteer Right to Know form, signed by volunteers
- Interview with Director
- Interview with Volunteer Coordinator (Program Supervisor) Interview with Volunteer
- Volunteer Clearance
- Inquiry with Front Desk Staff Contract staff file
- Memo

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a)(b)(c) Upon arrival at the facility during the intake process, each inmate will be provided with information explaining the agency zero tolerance Policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse and sexual harassment.</p> <p>The facility provides resident education at intake in formats accessible to all residents, including those who are disabled or Limited English Proficient (LEP). Education includes, but is not limited to:</p> <ol style="list-style-type: none"> <li>a. Facility Inmate Handbook (English and Spanish);</li> <li>b. CoreCivic 14-2AA Preventing Sexual Abuse and Misconduct Brochure (English and Spanish); and</li> <li>c. Notification of viewing times for PREA video (English and Spanish).</li> </ol>

Within 30 days following intake, inmates will receive comprehensive educational information on an inmate's right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. Information on agency policies and procedures will also be provided. (115.33 (b)) (5-ACI-3D-09). The 30-Day Comprehensive Education will be separate from Intake and may include, but is not limited to:

- a. Facility Orientation to PREA flyer (English and Spanish); and
- b. SACASA information flyer.

APS also states that inmates who have been transferred from another facility will receive intake material from the receiving facility to serve as refresher training

(d) The facility shall maintain documentation of inmate/inmate participation in educational sessions pertaining to sexual abuse and sexual harassment.

Samples of the Receiving and discharge checklist were provided which have a check box indicated 'orientation video shown/PREA video shown' and signed by inmates upon intake.

(e) APS states that Inmates will sign a facility specific form indicating acknowledgment that they have received intake information and the 30-day comprehensive education. This documentation will be maintained by the facility in the inmate file.

(f) APS states that in addition to providing such education, the facility will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

The auditor asked for and was provided a list of inmates with their intake date into the facility, none were in the facility prior to the standards being implemented.

During the tour, the facility information for inmates to show their access to PREA related processes and policies. Next to the phones used by inmates there was education information. While all information for reporting was present, the auditor suggested that the facility make more clear, the difference between reporting and advocacy information so inmates were clear in each number and its purpose. The facility, while the auditor was still onsite, immediately corrected and replaced these throughout the facility.

Inmates interviewed, both formally and informally were able to speak of the education they received and it being readily available. They mentioned having handbooks and seeing posters throughout the facility.

With three inmates who speak alternate languages, the auditor took the inmates into a private room and asked staff assigned to the area to call the phone number for services. The staff were immediately able to provide the information and the line was used for the interview. Staff indicated that should the inmate need privacy, such as with a legal call, they would allow for that from staff phones, which are unrecorded or monitored.



	<p>While reviewing records, it was seen that prior to March of 2023, inmates were not receiving the 30-day comprehensive education required by the Standard. The facility has changed the form so that the same form utilized at Intake will be used again to document what is being provided to inmates prior to the 30-day mark. The facility will provide a list of all new arrivals and create a spreadsheet to track education (intake and 30 day). This will be submitted each month beginning 5/1/23 (for all of April) and the 1st of the month thereafter until compliance has been documented.</p> <p>The facility, for corrective action, made two trackers and began forwarding information to the auditor on a bi-weekly basis. The first tracker included the backlog of inmates who have been at the facility who were missing training documentation and the second tracker was for new arrivals. For the backlog, the facility set a goal to catch up 150 per week. This tracker was sent to the auditor who would then randomly select files to review. All were caught up and completed both their initial and comprehensive education from the backlog. For newly admitted inmates, a total of 851 were admitted since the corrective action began. Randomly selected inmates were chosen by the auditor and the facility provided the documentation of timely completion.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• Inmate Handbook</li> <li>• Inmate Acknowledgement Form</li> <li>• Sexual Assault Awareness Brochure</li> <li>• PREA DVD</li> <li>• Inmate orientation checklist</li> <li>• PREA Posters</li> <li>• PREA Acknowledgement</li> <li>• Inmate Interviews, Specialized and Random</li> <li>• Inmate Files</li> <li>• Facility Walkthrough Interview with Intake Staff Interview with Counselors Interview with PCM</li> </ul>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) APS states that in addition to the general training provided to all employees and to the extent that CoreCivic conducts sexual abuse investigations, investigators shall receive training in conducting sexual abuse investigations in confinement settings. The PCM shall ensure that more than one (1) person at the facility receives training as

a sexual abuse investigator. This will ensure that a trained investigator is available as backup during employee absences (e.g.) leave, paid time off, sickness, offsite training, etc) from work.

The facility provided a Certificate of Completion for the two (2) assigned facility investigators. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the Moss Group. In addition, CoreCivic held a webinar training entitled "PREA Update, Investigation Standards and Required Specialty Training".

(b) APS states that specialized investigators training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and the APS: Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

After leaving the facility, the Director of PREA, Investigations for CoreCivic sent the auditor a new training, slides and sign in sheet, showing that the facility investigator took this training. In this training, and among other topics, they covered the preponderance of evidence standard, proof thresholds for criminal versus administrative investigations, and other related topics in this standard.

(c) APS states that employees who conduct sexual abuse and sexual harassment administrative investigations are required to document completion of this training by signing the 14-2A1 PREA Training Acknowledgment Specialized Training. This documentation shall be maintained in the employee training file.

The facility provided a Certificate of Completion for the two (2) assigned investigators. This investigator was interviewed and he was able to speak of the training her received and discussed the topics in this standard.

While onsite, the facility provide the general PREA Training documentation and the specialized training for investigators for each of the two investigators who investigated those reports selected by the auditor.

(d) Auditor is not required to audit this provision.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

	<ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• PREA Investigator Training Attendance Rosters</li> <li>• Email on Training Requirements</li> <li>• PowerPoint titled PREA Update Investigation Standards and Required Specialty Training</li> <li>• Training Certificates for each investigator assigned at this facility</li> <li>• Training History Records</li> <li>• PREA Investigations Flow Chart</li> <li>• PREA Investigations Narrative Template</li> <li>• PREA Investigations Log</li> <li>• Investigations Chain of Command</li> <li>• Interviews with Investigator, Warden, PC, PCM and random staff</li> </ul>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that in addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professions, who work regularly in the facility, shall receive specialized medical training as outlined below:</p> <ul style="list-style-type: none"> <li>· How to detect and assess signs of sexual abuse and sexual harassment;</li> <li>· How to preserve physical evidence of sexual abuse;</li> <li>· How to respond effectively and professionally to victims of sexual abuse and sexual harassments; and</li> <li>· How and to whom to report allegations of sexual abuse and sexual harassment.</li> </ul> <p>The training PowerPoint was reviewed entitled PREA Specialty Training for Medical and Mental Health Staff and it included all of the above provisions and areas.</p> <p>(b) The facility advised the auditor that they do not conduct forensic medical examinations at this facility.</p> <p>(c) Sample training reports for selected staff in the medical and mental health were printed and reviewed and demonstrated that documentation of these training is maintained. APS states that Medical and Mental Health Staff are required to document completion of this training by signing the appropriate section of 14-2A1 PREA Training Acknowledgment for Specialty Training. This documentation will be maintained in the employee training file.</p> <p>(d) APS states that In addition to the general training provided to all employees to</p>

comply with PREA Standard 115.31, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professionals, will receive specialized medical training as outlined below:

- a. How to detect and assess signs of sexual abuse and sexual harassment;
- b. How to preserve physical evidence of sexual abuse;
- c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- d. How and to whom to report allegations of sexual abuse and sexual harassment.

Only 3 of 39 Medical and Mental Staff received the required Specialized Training. As corrective action, all full time and part time medical and mental health care practitioners were required to take the CoreCivic NIC based PREA Medical/Mental Health Specialized Training course on-line in Talent Central. Documentation in the form of the CoreCivic 14-2A1 Form or proof of electronic signature will be sent to the Auditor.

Medical and mental health staff were interviewed by the auditor. They were able to recall taking training, indicated that they also take the training in annual in service with all other staff, that all other staff receive. Lastly, they were able to discuss the training and describe the requirements as per the standards while they did not recall and specific and special training.

As corrective action, all medical and mental health staff completed this training and documentation was provided to the auditor. In addition, the HSA and HR stated that they will work together to ensure that this is completed for new, future hires, in a timely manner.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- 125 APS
- PREA Specialized Training for medical and mental health staff
- Medical Staff Training Records
- MH Staff Training Records
- Interviews with Training Staff, HR, MH and Medical Staff

<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

(a) APS states that all inmates shall be assessed during an intake screening in order to obtain information relevant to housing, cell, work, education, and program assignments. The goal is to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

(b) APS states that inmates shall be assessed within 24 hours of arrival at a facility unless contracting agency policy authorizes 72 hours following arrival. This includes inmates who have been transferred from another facility, have been received from a reception center where an assessment may already have been completed as part of reception and inmates who have been returned from court or other leave status.

(c) APS states that screenings will be completed and documented using an objective screening instrument. The CoreCivic 14-2B Sexual Abuse Screening Tool will be utilized as the objective screening instrument.

(d) The Assessment Questionnaire Information for CoreCivic includes prompts as to:

- Whether the inmate has a mental, physical, or developmental disability;
- The age of the inmate;
- The physical build of the inmate;
- Whether the inmate has previously been incarcerated;
- Whether the inmate's criminal history is exclusively nonviolent;
- Whether the inmate has prior convictions for sex offenses against an adult or child;
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI);
  
- Whether the inmate has previously experienced sexual victimization;
- The inmate's own perception of vulnerability; and
- Whether the inmate is detained solely for civil immigration purposes.

(e) APS states that Screenings will also include a review of the inmate's available institutional file (or other documentation provided by the contracting agency or transferring facility) to identify acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency.

(f) APS states that within 25 days following the inmate's arrival at the facility, a reassessment of the inmate's risk level of victimization or abusiveness, will be completed utilizing the 14-2B Sexual Abuse Screening Tool. The time period from the date of arrival to the date that the reassessment is completed will not exceed 30 days. The facility will maintain a tracking system to ensure that reassessments are not completed beyond 30 days. The 30-day reassessment will include any additional relevant information received by the facility since the initial intake screening

(g) APS states that a reassessment will also be completed when warranted, due to a

referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate's risk of victimization or abusiveness. Following an incident of sexual abuse, a reassessment will be completed on both the alleged victim and alleged perpetrator

(h) APS states that inmates/inmates may not be disciplined for refusing to answer, or for not disclosing complete information.

The facility advised the auditor that disciplinary action will not be taken for any participant who refused to answer these questions.

(i) APS states

The facility will control the dissemination within the facility of responses to questions on the screening forms in order to ensure that the sensitive is not exploited to the inmate's detriment by staff or other inmates. Measures taken will include, but are not limited to:

- a. Sexual Abuse Screening Interviews with inmates at intake will be conducted with as much privacy as is reasonable given security and safety concerns.
- b. An inmate will not be permitted to complete his/her own 14-2B form (or contracting agency assessment form) or utilize assistance from other inmates to complete the form. All 14-2B forms will be completed by staff.
- c. Inmates will not be permitted to have access to files containing assessment forms belonging to other inmates.
- d. Where assessments are conducted electronically, access is granted only to those staff involved in the assessment process, those making housing and program decisions, medical and mental health staff, and staff with a need to know for the safe and secure operation of the facility

While interviewing classification staff, after being asked, they provided the auditor with a roster of over 1,500 inmate screenings that were outstanding. The facility immediately conducted training on the requirements of the standards and policy for this standard and related standards and a training roster was sent to the auditor as well as the documents and information that was trained on.

In addition, for the initial screening, the facility was utilizing the AZDOC screening tool in their database. The second screening was being completed on the CoreCivic form.

This process, in addition to the number missing, leads to this standard and related standards being non-compliant at the time of the onsite visit and interim. The AZ screening tool was reviewed by the auditor and the following was found to not be in compliance with the provisions in subsection (d) of this standard:

1. This information is auto-populated at the intake center for AZ and cannot be changed. This should not be auto-populated as it could change during the time an inmate is incarcerated.

3. This information is auto-populated at the intake center for AZ and cannot be changed. This should not be auto-populated as it could change during the time an inmate is incarcerated.

4. Not on screening.

5. The question asks "Current Conviction Violent".

6. Not on screening.

A meeting was held, onsite, with numerous AZ staff where they reviewed the standard and each provision and compared to the tool used or AZ. They agreed that questions were missing and the process was not in compliance with the standard. For the immediate fix, they stated that the facility will begin to solely use the CoreCivic tool for all inmate screenings, and will no longer use the AZ tool.

For corrective action, the facility developed two trackers: one for the backlog of inmates who needed to be properly screened and one for all new intakes into the facility. The facility set a goal of 150 inmate files and screenings per week for the 1,573 in the backlog. Every couple weeks, the facility provided a tracker to the auditor with inmates who were screened to complete this task. The auditor would randomly select files to be forwarded, and each that was selected and reviewed was done so. For the new 851 arrivals from April to September, the auditor randomly selected files to review. In the initial months, the auditor would find a couple that were late but much progress was shown and by the end of the corrective action period, the facility demonstrated that they were institutionalizing this process and were timely. All applicable staff in intake and unit management, were also trained on this process and the importance of proper screening. Bi-weekly meetings were held with the auditor and facility management to discuss the progress and review documentation that was completed for this corrective action.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- APS
- Policy 14-02 B Screening Tool (electronic and password protected)
- 30 day re-assessment example
- Direction for Completion of the Sexual Abuse Screening Tool Training/Activity Attendance Roster
- Assessment Questionnaire/Information Screening Tool from inmate files
- Interviews with intake staff, Unit Staff, AZDOC staff, PCM

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

(a) APS states that all inmates will be assessed during an intake screening in order to obtain information relevant to housing, cell, work, education, and program assignments. The goal is to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The facility will use the information from the 14-2B Sexual Abuse Screening Tool, completed at initial screening and at all subsequent reassessments, in the consideration of housing recreation, work program and other activities.

(b)(c) APS states that The facility will make individualized case by case determinations about how to ensure the safety of each inmate. In deciding whether to house a transgender/intersex inmate in a male or female unit, pod, cell, or dormitory within the facility subsequent to arrival, or, when making other housing and programming assignments for such inmates, the facility will consider whether the placement would ensure the inmate health and safety and whether the placement would present management or security problems

Each inmate is screened privately, and their housing programing and work assignments are determined on an individual basis.

(d) APS states that in accordance with ADCCR DO 810 Management of LGBTI Inmates, placement and programming assignments for each transgender or intersex inmate will be reassessed at least twice each year to review whether any threats to safety were experienced by the inmate. The CoreCivic 14-9A Transgender/Intersex Treatment Plan form will be used to document these re-assessments.

(e) APS states transgender or intersex inmate gender self-identification and self-assessment of safety needs will be given serious consideration in all housing and program assignments

(f) APS states that transgender and intersex inmates will be given the opportunity to shower separately from other inmates.

i. Separation is provided through separate shower stalls and/or time-phasing or scheduling (e.g. allowing an inmate to shower during designated count times).

ii. The number of separate showers per day and the time of day for showering separately may be limited due to facility physical plant and/or institutional need.

APS states that Transgender and intersex inmates/inmates shall be given the opportunity to shower separately from other inmates/inmates.

(g) APS states that the establishment of a unit or a pod solely dedicated to the housing of LGBTI and/or gender nonconforming inmates/detainees is strictly prohibited unless required by consent decree, court order or other comparable legal authority.

Staff interviewed (intake staff and counselors) who complete these screenings all



indicated that once an offender has a score, they will determine housing and programming accordingly. The potential victims are potential perpetrators at this facility are housed on separate dorms/pods and tracked before placement. Each staff member interviewed was aware of this process and demonstrated it to the auditor. The program areas and nature of the facility allows for always viewing and interaction with staff and the population, but staff are aware of these individuals at all times.

The facility began using the PREA Housing and Programs Review Form, for all transgender and intersex inmates, every six months. Copies of this for all five recent inmates who were completed were provided to the auditor to review. In addition, the facility stated that there was currently five transgender inmates at the facility; the auditor interviewed two of these individuals, who were randomly selected from this list. This individuals recalled being called out and have this form discussed. It includes information on the inmates perception of their safety, security, medical and mental health concerns, and PREA Risk Assessments. This is reviewed by and signed by the Security Director, Classification Supervisors, Facility Commander, Programs Director, Mental Health Staff and Medical Staff. In addition, with these packets are memos for applicable unit staff explaining shower accommodations made for transgender inmates who wish to shower separately.

For each of the transgender inmates present at the facility, the facility provided memos whereas the PCM sent a memo to the need to know unit staff that the inmate can shower privately during count after it clears or at night, after all other inmates have locked down. This memo is directed to stay in the control room.

While interviewing unit staff members, they described the process of housing and moving inmates to different units, programs, and details. A print out of a pod was provided which shows any scoring the inmate may have received from a screening which alerts staff when making housing designs if an inmate is a victim, potential victim, perpetrator or potential perpetrator.

Due to the large number of inmates who were missing screenings and the tool being used missing required information (see standard 115.41), the standard was non-compliant at the time of the interim report. As the screenings were completed timely and the back-log completed, staff ensured that the inmates were properly housed. In addition, the during the training that was required for standard 115.41's corrective action, staff were education on the importance of this standard and proper housing decisions.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- APS
- 14-02 B Sexual Abuse Screening Tool
- Transgender Inmate input on Housing Sample
- Interviews PCM, Unit Staff, Intake Staff

<b>115.43</b>	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>(a) AOS states that inmates/detainees at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.</p> <p>(b) APS states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.</p> <p>(c) APS states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days.</p> <p>(d) APS states that if involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainees safety and the reason why no alternative means of separation can be arranged.</p> <p>(e) APS states that every thirty (30) days, a review of each inmate/detainees status will be conducted to determine whether there is a continuing need for separation from the general population.</p> <p>The facility has advised the auditor that they have not had any inmates placed in voluntary segregated housing for high risk of sexual victimization within the last twelve (12) months. Interviews, both formal and informal, with unit staff, security staff and segregation staff corroborated this. In addition, the auditor asked the Chief for segregation review logs and reviewed 'the reason for placement' sections of this document. No inmates in segregation were seen as being held in their for victimization risk.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Confinement Record Sample</li> <li>• Segregation Logs</li> <li>• Interviews segregation Staff, High Level Security Staff, Warden, PCM</li> </ul>

**115.51 Inmate reporting**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

(a) APS states inmates will be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates or employees for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Inmates who are victims of sexual abuse have the option to report an incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods:

- i. Verbally reporting to any employee;
- ii. Submitting a request to meet Medical or Mental staff and/or reporting to medical staff during sick call;
- iii. Calling the posted PREA Hotline Reporting Number;
- iv. Forwarding a letter, sealed and marked 'confidential' to the Warden or Facility Investigator;
- v. Calling or writing someone outside the facility who can notify facility staff; and
- vi. Contacting the facility PREA Compliance Manager.

(b) APS states each facility will provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of CoreCivic or ADCCR and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to facility officials, allowing the inmate to remain anonymous upon request. Inmates in ADCRR contracted facilities may write to:

ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS  
PO BOX 18292  
PHOENIX, ARIZONA 85005

In addition, CoreCivic employees can report to the online Ethics reporting address. The auditor also filed a test report through the EthicsPoint System online at [https://secure.ethicspoint.com/domain/en/report\\_company.asp?clientid=45517&locationid=28782851&override=yes&agreement=no&companyname=CoreCivic](https://secure.ethicspoint.com/domain/en/report_company.asp?clientid=45517&locationid=28782851&override=yes&agreement=no&companyname=CoreCivic).

Within fifteen minutes of being filed online, the Director of Ethics and compliance wrote an email response while forwarding it to the facility and stated that this would be the process. The agency PREA Coordinator/Director was included on thread.

Warden and PCM immediately replied with receipt and stated that they would forward to be investigated.

Policy also states that inmates/detainees detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

(c) APS Employees/contractors and volunteers must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff will promptly document any verbal reports.

(d) APS states that CoreCivic employees, contractors, volunteers and third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24- hour Ethics line at 1-800-461-9330 or through [www.corecivic.com/ethicsline](http://www.corecivic.com/ethicsline)

The CoreCivic public website states:

Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including but not limited to:

- Contact the National Sexual Abuse Hotline at 1-800-656-4673
- Send a letter to the warden of the facility at the address provided on our facility profiles
- Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities.
- Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided.
- Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-866-757-4448 or e-mail <http://www.corecivic.ethicspoint.com/>

During the tour, the facility information for inmates to show their access to PREA related processes and policies. Next to the phones used by inmates there was education information. While all information for reporting was present, the auditor suggested that the facility make more clear, the difference between reporting and advocacy information so inmates were clear in each number and its purpose. The facility, while the auditor was still onsite, immediately correct and replaced these throughout the facility.

Posters were seen in all housing areas and in common areas throughout the facility, these posters were large, colorful and could be seen by inmates are a good eye level.

If an inmate includes a PREA complaint in a grievance, the grievance coordinator or staff processing grievances would take it out of the time frame for grievance responses and place it immediately into the PREA response process. It would be turned over to the Investigator and a 5-1 Incident report would be completed.

Technically an inmate could still submit a formal grievance on an allegation of sexual

abuse or sexual harassment if he or she wished but the response would be expedited so as to ensure his/her safety. An interview was held with the grievance coordinator who described this process.

During the facility walkthrough, the auditor notices inmate grievance forms and inmate request forms available in the day rooms and education area demonstrating that they are readily available. In addition, locked mailboxes are in each unit hallway for inmates to privately place inside. After discussion with numerous specialized staff, it was stated that only unit managers and higher could access certain boxes, only medical can access the medical mailboxes, only the grievance officer can open the grievance mailbox and mailroom staff open the mailbox.

During an interview with a mailroom staff member, the staff member was aware of the requirement to treat mail to confidential reporting in a confidential manner as it is legal mail. However, the staff was unaware of where these would be addressed. The facility immediately posted the addressed permitted and trained the staff on which entity is used. Documentation of the training and a picture of the posting was provided. A second discussion was held with mailroom staff. Should inmates need additional forms or writing utensils, officers and unit staff have these items and will provide to inmates.

In common areas such as education and library, the auditor observed inmate informal request forms and grievances forms, readily available for inmates to use.

By the inmate phones, a laminated sheet was seen which stated:

PREA Hotline:

Inmates may report staff sexual misconduct and/or staff sexual harassment, and inmate on inmate sexual assaults by utilizing the PREA Hotline (contracted inmate phone system) by following the below instructions:

Pick up the handset and hit option number 9, followed by option number 1. Dial 7732 (PREA). Inmates are not required to enter their PIN number or voiceprint. Listen to the message recording, which stated - 'you have reached the PREA Hotline.

If you would like to report a sexual assault or sexual abuse please leave a detail message. This information will remain anonymous. If you would like to report other issues not related to PREA, please utilize the established procedures at your unit as no action will be taken on non-PREA issues".

Leave a message detailing the alleged occurrence.

The information will be confidential and you will remain anonymous.

If you would like to report other issues not related to PREA, please utilize the established procedures at your unit.

The auditor recommended and the facility immediately added postings of the reporting information to be added to the phones that are used in segregation, so these inmates can see the numbers as the phone is brought to their cells. This was immediately addressed and pictures provided to the auditor.

	<p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• CoreCivic Website</li> <li>• CoreCivic Code of Ethics</li> <li>• Participant (Inmate) Handbook</li> <li>• First Responder card/staff reminders</li> <li>• Sexual Assault Awareness and Prevention pamphlet (English and Spanish) PREA poster</li> <li>• Inmate Interviews (Random and Specialized)</li> <li>• Staff Interviews (Random and Specialized)</li> </ul>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>(a)(b)(c)(d)(e)(f)(g) APS states that CoreCivic facilities do not maintain administrative procedures to address inmate grievances regarding sexual abuse. Allegations of sexual abuse and/or sexual harassment are not processed through the facility inmate grievance process. (115.52 (a))</p> <p>Should a report of sexual abuse or sexual harassment be submitted and received as an inmate grievance, whether inadvertently or due to contracting agency requirements, it will immediately be referred to the Facility Investigator or Administrative Duty Officer for investigation and reporting in accordance with this policy.</p> <p>All inmate grievances alleging sexual abuse and sexual harassment will be reported as PREA allegations in the 5-1 Incident Reporting Database (IRD).</p> <p>In common areas such as education and library, the auditor observed inmate informal request forms and grievances forms, readily available for inmates to use.</p> <p>An interview was held with the supervisor for the facility grievance officer. The auditor selected three months and asked to review the log. The grievance officers supervisor stated that should a grievance come in with a PREA related matter, it would be treated as an emergency grievance, immediately forwarded to the facility investigator and entered into the 5-1 system and the inmate would be immediately spoken with to ensure their safety. No time limits would apply. The auditor did note and inquire as to what the grievance officer would categorize the grievance as,</p>

	<p>should this occur as the AZ grievance log form provides categories for grievances and PREA is not included and there is not an other category where they could write the information in. She stated that it would probably be noted as a medical grievance.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Inmate Handbook</li> <li>• Grievance Log</li> <li>• Inmate confidential Mailboxes</li> <li>• Interview Grievance Officer's Supervisor</li> </ul>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that inmates have access to outside victim advocates for emotional support services related to sexual abuse and are provided with the mailing address and telephone number of a local rape crisis center. For La Palma Correctional Center, the Southern Arizona Center Against Sexual Assault (SACASA) provides emotional support services</p> <p>(b) APS states that reasonable communication between inmates and the posted numbers or addresses for emotional support or advocacy services will be permitted in as confidential manner as possible. Such communication will not be monitored and/or recorded. Written correspondence between inmates and these agencies will not be read without reasonable suspicion that the content is a threat to the security of the facility.</p> <p>To place a telephone call to an emotional support services agency the inmate must contact a Unit Staff member for permission to use a staff telephone. The inmate will be provided with as much confidentiality as is possible. Such requests will not be unreasonably denied.</p> <p>Inmates will be informed, prior to giving them access, of the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.</p> <p>a. Consistent with applicable laws and emotional support service provider policy, information may be reported to the facility without the inmate's consent, in the event that the inmate (1) threatens suicide or to commit other harm to self; (2)</p>

threatens to harm another person; (3) shares with the community agency information that relates to abuse or neglect of a child or vulnerable adult; or, (4) threatens the security of the facility or to escape.

b. If confidential information must be disclosed, facility staff will not share any information beyond what is necessary to address the immediate safety concern or to otherwise comply with applicable law.

During the facility walk-through, the auditor noticed that many units were missing the postings for the Rape Crisis Center and confidential support services. The facility immediately added and send the auditor pictures of these documents posted in the units.

During an interview with a mailroom staff member, the staff member was aware of the requirement to treat mail to support services in a confidential manner as it is legal mail. However, the staff was unaware of where these would be addressed. The facility immediately posted the addressed permitted and trained the staff on which entity is used. Documentation of the training and a picture of the posting was provided.

During the tour, the facility information for inmates to show their access to PREA related processes and policies. Next to the phones used by inmates there was education information. While all information for reporting was present, the auditor suggested that the facility make more clear, the difference between reporting and advocacy information so inmates were clear in each number and its purpose. The facility, while the auditor was still onsite, immediately correct and replaced these throughout the facility.

Inmates interviewed, both formally and informally were questions about advocacy availability and methods to contact. Many stated that they knew there was information posted and available in the inmate handbook, should they need it. A few inmates interviewed believed that this was similar to mental health and were unclear on the difference. They were immediately educated and provided an additional handbook with information.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- APS
- MOU with SACASA and CoreCivic
- PREA posters Inmate Handbook Flyers
- Phamplet
- Interviews, informal and formal with staff and inmates



<b>115.54</b>	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>(a) APS states that CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24 hours Ethics line at 1-866-757-4448 or through <a href="http://www.CoreCovic.ethicspoint.com">www.CoreCovic.ethicspoint.com</a>.</p> <p>The CoreCivic public website states:</p> <p>Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including, but not limited to:</p> <p>Send a letter to the warden of the facility at the address provided on our facility locator.</p> <p>Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities.</p> <p>Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided. Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-800-461-9330 or e-mail <a href="http://www.corecivic.com/ethicsline">www.corecivic.com/ethicsline</a></p> <p>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.</p> <p>The auditor also filed a test report through the EthicsPoint System online at <a href="https://secure.ethicspoint.com/domain/en/report_company.asp?clientid=45517&amp;locationid=28782851&amp;override=yes&amp;agreement=no&amp;companyname=CoreCivic">https://secure.ethicspoint.com/domain/en/report_company.asp?clientid=45517&amp;locationid=28782851&amp;override=yes&amp;agreement=no&amp;companyname=CoreCivic</a>. The email was answered within fifteen minutes by Ethics staff and sent to the auditor and facility detailing the process.</p> <p>Interviews with random and specialized staff and inmates both indicated that they were aware that reports from third parties would be accepted and investigated.</p> <p>All staff interviewed were able to speak of the Ethic Line and the posters for staff in staffing lunch rooms and by the time clocks. In addition, staff stated that should the wish to report, they feel that they can go to management and ask to be private; they stated that they trust the management and Warden at this facility and believe allegations and concerns would be taken seriously.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p>

	<ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• CoreCivic website</li> <li>• 14-2AA</li> <li>• Inmate handbook</li> <li>• Posters and Information throughout Facility</li> <li>• Staff Interviews</li> </ul>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that accordance with this policy, employees/contractors are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment [sic] that has occurred in any facility (including a facility that is not part of CoreCivic).</p> <p>Policy further states that:</p> <ul style="list-style-type: none"> <li>· Employees/contractors must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.</li> <li>· When it is learned that an inmate is subject to substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate.</li> <li>· Employees/contractors who fail to report allegations may be subject to disciplinary action.</li> </ul> <p>All staff have signed an acknowledgment of this provision, on the 14-2A form, CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement.</p> <p>A memo from the facility stated that the facility has had no reports of retaliation against staff or inmate who have reported incidents of alleged sexual abuse or sexual harassment since the previous audit.</p> <p>(b) APS states that Apart from reporting to designated supervisors or officials, employees/contractors will not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, and as specified in this policy, to make treatment, investigation, and other security and management decisions.</p> <p>(c) APS states that unless otherwise precluded by federal, state or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined in policy. At the initiation of providing medical care, both medical and mental health professionals will inform inmate of their professional duty to report and the</p>

	<p>limitations of confidentiality.</p> <p>(d) APS states that employees may privately report sexual abuse and sexual harassment of inmates by forwarding a letter, sealed and marked 'confidential' to the facility Administrator/Director or contact the CoreCivic ethics and compliance hotline.</p> <p>(e) APS states that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be reported to the facility's designated investigators.</p> <p>The auditor reviewed multiple reports and was able to see the process involving the provisions of this standard. Every staff interviewed was able to describe their role as a first responder. Staff all had on their ID's a checklist of first responder duties. All random staff interviewed, in addition to some speciality selected interviews, were provided scenarios and were able to in detail, first responder duties.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Staff Rosters</li> <li>• Incident Log</li> <li>• Employee Training</li> <li>• Inmate Notification Poster</li> <li>• Staff Acknowledgement Sheets</li> <li>• Notes/Memos</li> <li>• Investigative Report with detailed first responder duties</li> <li>• Interviews with Random Staff</li> <li>• Interviews with Specialized Staff</li> </ul>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that when it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate. It is CoreCivic's policy to aggressively investigate all allegation, regardless of the source, and prosecute those who are involved in incidents of sexual abuse. Alleged victims of sexual abuse or harassment will be provided a supportive and protective environment.</p> <p>In the past twelve (12) months, there were no instances in which the agency or facility determined that an inmate was subject to a substantial risk of imminent</p>

	<p>sexual abuse.</p> <p>During an interview with CoreCivic Vice President, Operations Administration, he stated that staff take immediate action to protect the inmate by removing the inmate from the area and/or individuals where risks may be stemming from, and an investigation is immediately initiated.</p> <p>During interviews with random and speciality staff, every single staff member, regardless of rank and title, stated that should they believe or an inmate report threats or suspicion of harm, they would immediately separate and protect that inmate or the inmate subject to the threat.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Interview with CoreCivic Vice President, Operations Administration Sample Report</li> <li>• Interview with PCInterviews with Random Staff</li> </ul>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider’s facility), the following actions shall be taken:</p> <ol style="list-style-type: none"> <li>1. The Administrator/Director that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.</li> <li>2. A copy of the statement of the inmate shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.</li> <li>3. the facility will document that it has provided such notification through the 5-1B Notice to Administration (NTA).</li> </ol> <p>The facility stated that there have been three allegations received that an inmate was sexually abused while confined at another facility.</p> <p>(b) APS states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider’s facility),</p>

the following actions shall be taken. The Administrator/Director that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.

(c) APS states that all such contacts and notification shall be documented on the 5-1B Notice to Administration.

(d) APS states that upon receiving notification from another facility that an incident/allegation of sexual abuse has occurred while the inmate was previously confined at the facility, the following actions will be taken:

--- The facility will record the name of the agency making the notification, and any information (names, dates, time) that may assist in determining whether an investigation was conducted. An inmate statement should be requested.

--- If the allegation was reported and investigated in accordance with CoreCivic policy and/or referred for criminal investigation if appropriate, the facility will document the allegation, and that the allegation has already been addressed. Under this circumstance, further investigation and notification need not occur.

--- If the allegation was not reported and/or not investigated, facility staff will initiate reporting and investigation procedures in accordance with this policy. The Incident will be reported through the 5-1 IRD.

The facility warden and PAQ stated that there were no (zero) allegations have been received from other facilities in the past twelve (12) months.

During an interview with the CoreCivic Vice President, Operations Administration, he stated referrals to and from other facilities occurs most often at the facility level rather than at the corporate office level. The information is received by the Warden at the facility. However, any staff who received the information know to report it to the Warden, for appropriate action. It then gets added into our incident system and the PREA protocols are initiated. If the allegation was alleged to have occurred at another facility, the facility Warden receiving the information would notify the Warden at the other facility within 72 hours. If the allegation received was that an incident of sexual abuse allegedly occurred within the CoreCivic facility both the partner agency and the investigative entity responsible for criminal investigations would be notified. He also stated that the most common examples are allegations inmates make during their intake process. The CoreCivic staff obtain as much information as possible from the inmate and provide this to Warden at the other facility as part of the notification.

Samples of the facility-to-facility notification were provided to the auditor to review.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Corrections PREA Standards Compliance Checklist
- APS

	<ul style="list-style-type: none"> <li>• Sample Notifications</li> <li>• Interviews PCM, Warden, PC</li> </ul>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that Separate the alleged victim from the alleged abuser. When the alleged abuser is an inmate , he/she will be secured in a single cell (if available) to facilitate the collection of evidence if required.</p> <p>A sample report was reviewed by the auditor for an incident of alleged sexual abuse. In the report, staff documented their efforts to maintain the preservation of evidence as noted in the provisions of this standard and in policy.</p> <p>(b) APSstates that if the first staff responder is not a security staff member, the responder shall be required to request that they alleged victim not take any actions that could destroy physical evidence and notify security staff.</p> <p>Staff are all provided, and the auditor saw while on-site, a First Responder Duty card to add to their ID. It states:</p> <p>CoreCivic has a zero tolerance for all forms of sexual abuse and sexual harassment.</p> <p>FIRST RESPONDER DUTIES:</p> <ul style="list-style-type: none"> <li>• Separate the alleged victim and abuser (ordinarily the victim should not be placed in segregation/restrictive housing).</li> <li>• Preserve and protect the crime scene until steps can be taken to collect evidence.</li> <li>• If the abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim not take any actions that could destroy physical evidence (such as washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating).</li> <li>• ensure the alleged abuser does not take any of the above actions that can destroy physical evidence.</li> <li>• Immediately notify your supervisor and medical and mental health practitioners.</li> <li>• Confidentiality must be maintained, apart from reporting to designated supervisors or officials.</li> </ul> <p>APS also states that While in the Health Services Department, and if the abuse</p>

	<p>occurred within a time period that allows for collection of physical evidence, responding staff will, to the best of their ability, request that the victim does not take any actions that could destroy physical evidence. This would include, as appropriate, washing, showering, removing clothing without medical supervision, urinating, defecating, smoking drinking, eating, or brushing his/her teeth. If the abuse occurred within a time period that allows for collection of physical evidence and when the alleged abuser is an inmate, staff will ensure that the alleged abuser does not take any actions could destroy physical evidence. This would include as appropriate washing, showering, removing clothing without medical supervision, urinating, defecating, smoking drinking, eating, or brushing his/her teeth.</p> <p>Staff had first responder duties reminder cards on their ID lanyards. Those interviewed, formally and informally, were able to described their first responder duties when provided with a scenario by the auditor.</p> <p>Documents reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• First Responder Cards</li> <li>• PREA Training Acknowledgements</li> <li>• Interviews with Random Staff</li> <li>• Interview with PCM</li> <li>• Sample Report</li> </ul>
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<b>115.65</b>	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>(a) APS states In order to coordinate actions taken by initial first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse, the facility has established a Sexual Abuse Response/ Review Team (SART) that will include, but is not limited, to the following positions:</p> <ul style="list-style-type: none"> <li>• PREA Compliance Manager</li> <li>• Security Representative</li> <li>• Medical Representative</li> <li>• MH Representative</li> </ul> <p>The SART responsibilities shall include the following in part:</p>

	<ul style="list-style-type: none"> <li>• Responding to reported incidents of sexual abuse;</li> <li>• Responding to victim assessment and support needs;</li> <li>• Ensuring policy and procedures are enforced to enhance inmate safety; and</li> <li>• Participating in the development of practices and/or procedures that encourage prevention of sexual abuse and enhance compliance with PREA National Standards.</li> </ul> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Checklist</li> <li>• APS</li> <li>• Interview with CoreCivic Vice President, Random Staff, Specialized staff</li> <li>• Emails regarding MOU, SANE and advocate</li> </ul>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that neither CoreCivic nor any other entity responsible for collective bargaining on CoreCivic’s behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the company’s ability to remove alleged employee sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Nothing in this requirement shall restrict entering into or renewal of agreements that govern:</p> <ul style="list-style-type: none"> <li>• The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions outlined above in Q.2.a-c. and a preponderance of the evidence in determining whether sexual abuse or sexual harassment are substantiated.</li> <li>• Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the employees personnel file following a determination that the allegation of sexual abuse is not substantiated.</li> </ul> <p>During an interview with the CoreCivic Vice President, Operations Administration, he stated that CoreCivic as an agency has entered into and/or renewed collective bargaining agreements since August 20, 2012. The agreements permit CoreCivic to</p>



	<p>remove alleged staff sexual abusers from contact with an inmate pending an investigation of disciplinary action.</p> <p>La Palma is not subject to any collective bargaining agreement.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Interview with CoreCivic Vice President, Operations Administration</li> </ul>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that inmate and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other inmates or staff.</p> <p>(b) APS also states that ADO staff, or the Warden will determine on a case by case basis whether or not placement of a staff member in a non-contact role with the victim and/or other inmates is warranted. This determination will take into account the gravity and credibility of the allegations.</p> <p>(c) APS states for at least 90 days (30/60/90) following a report of sexual abuse, the agency will monitor the conduct and treatment of inmates who reported sexual abuse and inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation against them by inmates or staff. Monitoring will be documented on the 14-2D PREA Retaliation Monitoring Report (30/60/90). Emotional support services may be provided for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations</p> <p>In the past twelve (12) months, there has been zero incidents of retaliation occurring at this facility, according to the PAQ.</p> <p>(d) APS states the facility will employ multiple protection measures to monitor retaliation against inmates including but are not limited to, (a) housing changes or transfers for inmate victims or abusers, (b) removal of alleged staff or inmate abusers from contact with victims, (c) emotional support services for inmates who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, (d) periodic status checks, and (e) monitoring disciplinary reports, housing or program changes.</p>

	<p>APS states that The facility will continue such retaliation monitoring beyond 90 days if the initial monitoring indicates a continuing need.</p> <p>(e) APS states that If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency will take appropriate measures to protect that individual against retaliation.</p> <p>During an interview with the CoreCivic Vice President, Operations Administration, he stated that for both inmates and staff who have reported allegation of sexual abuse, we provide monitoring on a 30/60/90-day period, longer if needed, to ensure no retaliation has occurred. These reviews are documented on an attachment to our 14-2 policy. The review takes into consideration any actions which may be perceived as retaliatory whether it be housing and/or job assignments with inmates and shift changes, evaluations, etc. for staff. These reviews also prohibit retaliation for any reason, and we include this expectation in training with staff. Any violations are acted upon accordingly. For those who cooperate and express a fear of retaliation, our policies and practices prohibit retaliation for any reason and we include the expectation in training with staff. Any violations are acted upon accordingly.</p> <p>Of the investigations selected and reviewed by the auditor, all included retaliation monitoring. In addition, while onsite and while interviewing the retaliation monitor, the auditor selected a new case and reviewed the monitoring form which was completed. The monitor was able to detail the process and provided samples of what is considered when monitoring and speaking with the inmates.</p> <p>(f) APS states that the facility obligation to monitor retaliation for staff and inmates will terminate if the facility determines that the allegation is unfounded.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped the auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• PREA Retaliation Monitoring Form</li> <li>• Incident Report</li> <li>• 30/60/90 day samples</li> <li>• Interviews with CoreCivic Vice President, Random Staff, PCM, Retaliation Monitor</li> </ul>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) APS states that inmates at high risk for sexual victimization shall not be placed in

	<p>involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.</p> <p>APS states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.</p> <p>In addition, APS states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. If involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainees safety and the reason why no alternative means of separation can be arranged.</p> <p>APS states that every thirty (30) days, a review of each inmate/detainees status will be conducted to determine whether there is a continuing need for separation from the general population.</p> <p>The facility advised the auditor that the facility has had no inmates placed in involuntary segregated housing for high risk of sexual victimization within the last twelve (12) months. Inmates involved in incidents were reviewed with to determine housing and those inmates were not placed in segregation.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> </ul>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that facility administrative investigations into allegations of sexual abuse and sexual harassment shall be done promptly, thoroughly, and objectively for all allegations including third party reports and anonymous reports.</p> <p>(b) APS states the facility shall use investigators for administrative investigations who have received special training in sexual abuse investigations pursuant to</p>

Standards.

The facility provided a Certificate of Completion for the two (2) assigned facility investigators. The certificates are from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the National Institute of Corrections. In addition, CoreCivic held a webinar training entitled PREA Update, Investigation Standards and Required Specialty Training.

(c) APS states that specialized shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02 : Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(d) APS states that all allegations of sexual abuse and sexual harassment will be referred for investigation to the ADCRR Criminal Investigations Unit (CIU). That agency investigative process as outlined in ADCRR DO 125 Section 6.0 and DO 608 Criminal Investigations will be followed for allegations of sexual abuse

Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02 : Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(f) APS states Administrative Investigations will include an effort to determine whether staff actions or failures to act contributed to the abuse. Such investigations will be documented on the 5-1G Incident Investigation Report via the IRD and will detail the following components:

- Investigative facts (i.e. specific details about what actually happened);
- Physical evidence (e.g. clothes collected, medical evidence, etc.);

- Testimonial evidence (e.g. witness statements);
- Reasoning behind credibility assessments (i.e. why is the person deemed credible or not credible);
- Investigative findings (i.e. discovery or outcome of the investigation); and
- An explanation as to how the conclusion of the investigation was reached the conclusion.

(g) Criminal Investigations are completed by the AZDOC. These notifications are noted in the 5-1 packets as notification but no other information, documentation, follow-up or conclusions have been produced by the facility.

(h) Criminal investigations are completed by the AZDOC. These notifications are noted in the 5-1 packets as notification but no other information, documentation, follow-up or conclusions have been produced by the facility.

(i) APS states that the agency shall retain all investigative reports into allegations of sexual abuse for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

In addition, PREA investigative files and written reports to be retained if the alleged abuser is incarcerated or employed plus five (5) years.

(l) APS states that the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Each of the investigations in the past year were reviewed by the auditor. They were thorough, detailed and prompt and included each element of this standard.

The records room was viewed and records staff is always present. Only authorized staff can view private information in the computer and in the file room. A memo is posted of which staff have access to inmate files. All screening information in computerized and only need to know staff have access to the responses to the computer questions. Additional staff, who may be required to move inmates housing or assign inmates to programs can see if any inmate is scored as a victim, potential victim, perpetrator, or potential perpetrator to use that information to determine housing.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- APS
- Investigations Training
- Investigations Records

	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>(a) APS states in any sexual abuse or sexual harassment investigation in which the facility is the primary investigating entity, the facility shall utilize the preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place.</p> <p>Investigations that were provided and reviewed which demonstrated that a preponderance of the evidence standard was applied and noted in the investigation conclusion.</p> <p>An interview with the facility investigator demonstrated that he was aware of this burden and he was able to describe it.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• 5-1A Incident Report with 5-1G Investigative Report</li> <li>• Investigations Training curriculum from NCICS</li> <li>• National PREA Resource Center Notification of Curriculum Utilization Investigation</li> </ul>

<b>115.73</b>	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>(a) (b) APS states that following an investigation into an inmate’s allegation that he/ she suffered sexual abuse at the facility, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform the inmate.</p> <p>(c) APS states that following an inmate’s allegation that an employee has committed sexual abuse against the inmate the facility shall subsequently inform the inmate (unless the facility has determined that hey allegation in unfounded) whenever:</p> <p>(1) The employees no longer posted within the inmate’s unit as a result of the finding of the investigation;</p>

	<p>(2) The employee is no longer employed at the facility;</p> <p>(3) The facility learns that the employee has been indicted on a charge related to sexual abuse within the facility; or</p> <p>(4) The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility.</p> <p>(d) APS states that following an inmate’s allegation that he/she has been sexually abused by another inmate, the facility shall subsequently inform the alleged victim whenever:</p> <ol style="list-style-type: none"> <li>1. The facility learns that the alleged abuser has been indicted in a charge related to sexual abuse within the facility; or</li> <li>2. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</li> </ol> <p>(e) APS states all inmates/inmate notifications or attempted notifications shall be documented on the DCCR Form 125-4  Notification of Outcome of Allegation. The inmate shall sign the 125-4, verifying that such notification has been received. The signed 125-4 shall be filed in the inmate’s institutional file.</p> <p>(f) APS states the facilities obligation to notify the inmate as outlined in the section shall terminate if the inmate is released from CoreCivic’s custody.</p> <p>The facility did not have any samples at the time of the onsite portion of the audit and according to the PAQ. However, blank samples of the template and form that would be used.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Interview with PC</li> <li>• Interview with PCM</li> <li>• Interview with Director</li> <li>• ADCCR Form 125-4 Notification of Outcome of Allegation</li> <li>• Disciplinary sanctions for staff</li> </ul>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>(a)(b) APS states that employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic’s sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.</p> <p>La Palma has not had any staff disciplined for violating sexual abuse or sexual harassment policies within the past twelve (12) months.</p> <p>In the past twelve (12) months, according to the PAQ, there have been zero staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies.</p> <p>(c) APS states that disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the employee’s disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories.</p> <p>(d) APS states that all terminations for violations of CoreCivic sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>In the past twelve (12) months, according to the PAQ, there have been zero staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies. HR staff confirmed this during interviews.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Investigation Samples</li> </ul>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states that any civilian, volunteer or contractor who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies and to any relevant licensing body.</p> <p>In the past twelve (12) months, according to the PAQ, there have been zero contracted staff members who have been terminated or reported to law enforcement</p>



	<p>for violating agency sexual abuse or sexual harassment policies.</p> <p>Relationships that are beyond or outside the scope of the approved volunteer service being provided by the volunteer constitute grounds for immediate termination or removal from the Volunteer Roster. Termination and/or removal from volunteer services and the Volunteer Services roster may result from any violation of the volunteer code of ethics or volunteer dress code and the facility's published dress codes, and conduct restrictions at the discretion of the Warden.</p> <p>(b) APS states that any other violation of CoreCivic sexual abuse or sexual harassment policies by a civilian or contractor will result in appropriate corrective action up to and including restricting contact with inmates and removal from the facility.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Note from facility: there have been no substantiated allegations of contractor or volunteer sexual abuse/harassment.</li> </ul>
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) APS states in the Disciplinary Procedures, substantiated incidents sections that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engages in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p>In the past twelve (12) months, there have been no administrative findings or criminal findings of guilt on inmate-on-inmate abuse that have occurred at this facility, according to the PAQ.</p> <p>(b) APS states in the Disciplinary Procedures, substantiated incidents sections that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>(c) APS states in the Disciplinary Procedures, substantiated incidents sections that the disciplinary process shall consider whether an inmates mental disabilities or mental illness contributed to his/ her behavior when determining what type of sanction, if</p>

	<p>any, should be imposed.</p> <p>(d) APS states in the Disciplinary Procedures that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the alleged perpetrator to participate in such interventions as a condition of access to programming or other benefits.</p> <p>(e) APS states in the Disciplinary Procedures, substantiated incidents sections that an inmate may be disciplined for sexual conduct with an employee only upon finding that the employee did not consent to such contact.</p> <p>(f) APS states that inmates who deliberately allege false claims of sexual abuse can be disciplined. For the purposes of disciplinary action, a report of sexual abuse made in good faith based on a reasonable belief that the alleged contact occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>In the past twelve (12) months, there have been no inmates that received disciplinary action for falsified reports of sexual abuse.</p> <p>(g) Policy also states that sexual activity between inmates is prohibited in all CoreCivic facilities, and inmates may be disciplined for such activity. Such activity shall not be deemed sexual abuse if it is determined that the activity is not coerced.</p> <p>Disciplinary logs were reviewed to corroborate this.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• Incident report</li> <li>• Memo/Note</li> <li>• Staff interviews</li> </ul>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) (b) (c) APS states that inmates identified during the intake screening as high risk with a history of sexually assaultive behavior, whether it occurred in an institutional setting or in the community, will be offered a follow- up meeting with a mental health practitioner within 14 days of the intake screening. Inmates with a history of sexually

assaultive behavior will be identified, monitored, and counseled.

Inmates identified during the intake screening as at risk for sexual victimization with a history of prior sexual victimization whether it occurred in an institutional setting or the community will be offered a follow-up meeting with a medical or mental health practitioner or other qualified professional within 14 days of the intake screening. Inmates at risk for sexual victimization will be identified, monitored, and counseled.

(d) Policy also states that patient inmate information, whether in the form of the documentary medical record, computerized data, or as information known to a member of the Health Services staff, is strictly confidential and may be disclosed only to those who are responsible for the patient inmate's care or who have a legitimate interest in the patient inmate's medical history.

(e) APS states that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

APS states that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

In addition, an intake packet from mental health was provided to the auditor which is used when an inmate prompts it by answers to certain questions on the PREA Screening, which included: Intake checklist, Comprehensive Clinical Record Review, Health Questionnaire, Sick Call Procedures, Problem Oriented Progress record, and Teaching Counseling Plan Document, among other medical related documents.

After discussions with numerous unit staff, each detailed the process and requirements to notify mental health should an inmate during a screening indicate prior victimization or perpetration, for a follow-up visit. The auditor selected three recent inmates and the referrals were documented and provided to the auditor.

The staff, however, were not using the required form for this and were emailing notes. The facility immediately conducted training on the requirements of the standards and policy for this standard and related standards and a training roster was sent to the auditor. The new process will include the use of the PREA Risk Assessment Medical and Mental Health Follow up form which will make it clear if the referral is completed and the reason for the referrals.

While interviewing both MH and medical staff, the auditor inquired about informed consent from the inmates. Staff provided the auditor with a sample form from AZ Department of Corrective and Rehabilitation that is used titled *Mental Health Treatment Consent* which describes the risks and disadvantages as well as the advantages of disclosing this type of information.

Based on the review and for corrective action, the facility is not tracking the required offers of mental health/medical as a result of screening in 115.41. This will be done going forward using the CoreCivic form developed for this purpose. The facility will

	<p>discontinue the practice of referring all identified inmate victims and/or predators to mental health and will refer only those who have accepted the documented The facility will create a spreadsheet to track offers of mental health services required by the standards. This will be submitted each month beginning 5/1/23 (for all of April) and the 1st of the month thereafter until compliance has been documented. Attached to the Spreadsheet the facility will be the new form showing date of offer for applicable inmates and documentation that the inmate was seen by MH.</p> <p>For corrective action and in coordination with the corrective action for standards 115.33 and 115.41, the facility through the tracker which was forwarded and files selected he MH referrals that were completed, as required by the standard and the policy. Staff were trained on the process and the files selected by the auditor demonstrated an understanding and compliance.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• MH Referrals</li> <li>• Staff Training</li> <li>• Corrective action (see standard 115.41)</li> <li>• Interviews MH staff, Unit Staff, Intake Staff</li> </ul>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged RAPE that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.</p> <p>Beyond the seventy-two (72) hours, physical trauma is evident, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.</p> <p>Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual abuse shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests.</p>

	<p>La Palma has qualified medical staff on site twenty-four (24) hours per day.</p> <p>(b) Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.</p> <p>(c) Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• Policy 13-79 Sexual Assault Response</li> <li>• Investigation sample</li> <li>• Interview Medical and MH staff</li> <li>• Interviews, Inmates who reported</li> </ul>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a)(b) Policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two hours, QHCP will examine the patient inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate to be transported to the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease. If physical trauma is evident for an incident beyond the seventy-two (72) hours, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.</p> <p>(c) Policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two hours, QHCP will examine the patient inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate to be transported to the local designated Emergency Room</p>

	<p>(ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease. If physical trauma is evident for an incident beyond the seventytwo (72) hours, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.</p> <p>(d) Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests. In the event the inmate tests positive for pregnancy, the patient inmate will be provided information regarding lawful pregnancy-related services in a timely manner.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• Policy 13-79 Sexual Assault Response</li> <li>• Pamphlet, English and Spanish</li> <li>• 5-1A Incident Report</li> <li>• Sexual Abuse Screening Tool</li> <li>• Medical and Mental Health Follow Up</li> <li>• Sexually Transmitted Disease Testing</li> <li>• Interviews, MH and Medical Staff</li> <li>• Interviews, Inmates who reported</li> </ul>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>(a) APS states that the Warden/ Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded.</p> <p>In the past twelve (12) months, the PAQ indicated that there has been one investigation of alleged sexual abuse completed at the facility, excluding ‘unfounded’ incidents.</p> <p>(b) APS states that an incident review team will review the incident within thirty (30) days of the conclusion of the investigation.</p>

(c) APS states that in addition to the administrator/director, the incident review team shall include upper-level facility management, with input from line supervisors, investigators and medical or mental health practitioners.

(d) APS states that the incident review team shall:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI and/or gender non-conforming identification, status or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility;
3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts; and
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Further, policy states that all findings and recommendations for improvement will be documented on the ADCCR Form 125-2 Incident Review Report. Completed forms will be forwarded to the Administrator/Director, the PCM, and the FSC PREA Compliance Coordinator.

(e) APS states that the facility shall implement the recommendations for improvement or shall document reasons for not doing so.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- APS
- Sexual Abuse or Assault Incident Review Form
- Interview with PREA Coordinator
- ADCCR Form 125-2
- 5-1H Incident Packet Checklist
- Interview with Incident Review Team Member
- Interview with PREA Compliance Manager
- Investigation Sample

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>(a) (e) APS states that CoreCivic will collect accurate and uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. Each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting.</p> <p>(b) (c) APS states that the incident-based sexual abuse data will be aggregated annually and will include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice. Upon request, CoreCivic will provide all such data from the previous calendar year to the Department of Justice no later than June 30th or at a date requested by that Department.</p> <p>(d) APS states that CoreCivic will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>(f) APS states that the incident-based sexual abuse data will be aggregated annually and will include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice. Upon request, CoreCivic will provide all such data from the previous calendar year to the Department of Justice no later than June 30th or at a date requested by that Department.</p> <p>The facility will respond to the SSV if selected by the DOJ to do so.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• APS</li> <li>• CoreCivic 2021 Annual PREA Report</li> <li>• CoreCivic 2022 Annual PREA Report</li> </ul>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detections and response policies, practices and training, to include: Identifying problem areas;</p> <p>Taking corrective action on an ongoing basis; and preparing an annual report of</p>



	<p>findings and corrective actions for each facility, as well as CoreCivic as a whole.</p> <p>(b) This report, mentioned above, include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of CoreCivic’s progress in addressing sexual abuse.</p> <p>(c) CoreCivic’s report shall be approved by the company’s Chief Corrections Officer and made readily available to the public through CoreCivic website.</p> <p>(d) Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated.</p> <p>During an interview with CoreCivic Vice President, Operations Administration, he stated he reviews and approves annual reports written as per this standard. Further, he stated that PREA data is reviewed on a daily, monthly, and annual basis. Incident data is provided daily to select FSC staff in a daily PREA report. Monthly and annually the data is reported as metrics in a format that can determine if there are trends at individual facilities or with inmate populations. Facilities can use the data to identify where sexual abuse may be occurring and whether changes to either physical plant, presence of staff/video coverage, or procedures would minimize the risks of incidents in those areas.</p> <p>The PC for the agency stated that all reports do not contact any identifying or personal information for the inmates and/or staff involved. Corrective action is and could be ongoing and could be facility specific, contract specific or agency wide.</p> <p>Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:</p> <ul style="list-style-type: none"> <li>• PREA Standards Compliance Checklist</li> <li>• CoreCivic 2021 Annual PREA Report</li> <li>• CoreCivic 2022 Annual PREA Report</li> <li>• CoreCivic Website Interviews, PC and VP</li> </ul>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>APS states that the CoreCivic Annual Report will be approved by the company's Chief Operating Officer and made available to the public through the CoreCivic website. Before making aggregated sexual abuse data publicly available, CoreCivic will remove all personal identifiers.</p>

	<p>In addition, Any requests for information from an outside agency or entity (excluding the contracting governmental correctional agency) regarding incidents of sexual abuse/harassment will be forwarded to and reviewed by the FSC General Counsel or designee, and the FSC PREA Coordinator, prior to sending the response to the requesting entity.</p> <p>The agency will maintain sexual abuse data collected pursuant to 115.87 for at least ten years after the date of the initial collection unless federal, state, or local law requires otherwise</p> <p>Sexual Abuse information and the CoreCivic Annual reports from 2013 to the present are located at the following:</p> <p><a href="https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea">https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea</a></p> <p>Audit reports and facility specific PREA information is located at the following:</p> <p><a href="https://www.corecivic.com/facilities/la-palma-correctional-centerp">https://www.corecivic.com/facilities/la-palma-correctional-centerp</a></p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>All information for CoreCivic PREA Related topics is located at:</p> <p><a href="https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea">https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea</a></p> <p>This includes all audit reports on the facility specific pages and annual reports from 2013 through 2022.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency has published on its agency website and has made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEEDING THIS AUDIT.</p>

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

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes



	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes



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

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate’s detriment by staff or other inmates?	
<b>115.42 (a) Use of screening information</b>		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b) Use of screening information</b>		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c) Use of screening information</b>		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate’s health and safety, and whether a placement would	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	



	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d) Protective Custody</b>		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e) Protective Custody</b>		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a) Inmate reporting</b>		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.51 (b) Inmate reporting</b>		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

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

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes



	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

<b>115.73 (b) Reporting to inmates</b>		
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c) Reporting to inmates</b>		
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d) Reporting to inmates</b>		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	



	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

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

<b>(f)</b>		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes