



14-2-DHS Sexual Abuse Prevention and Response

AUTHORITY: COMPANY POLICY

FSC EFFECTIVE

FEBRUARY 1, 2019

DATE: FSC

DATE:

SUPERSEDES JUNE 19, 2017*; NOVEMBER 15, 2017*; NOVEMBER 3, 2014* (AND PCNs* 14-2(01) MAY 26, 2015;

14-2(02) JANUARY 26, 2017; 14-2(03) APRIL 19, 2017) (*where applicable)

FACILITY: CIBOLA COUNTY CORRECTIONAL CENTER

FACILITY

SUPERSEDES JUNE 30, 2017

DATE:

FACILITY

EFFECTIVE NOVEMBER 17, 2021

DATE:

POLICY:

CoreCivic is committed to protecting detainees from personal abuse, corporal punishment, personal injury, disease, property damage, and harassment (*ACI 4-4281*). This policy provides CoreCivic detention facilities with procedures for complying with the Prison Rape Elimination Act (PREA) of 2003, Department of Homeland Security (DHS) Standards to Prevent Detect and Respond to Sexual Abuse and Assault in Confinement Facilities (79 Fed. Reg. 13100 March 7, 2014) and the Immigration and Customs Enforcement (ICE) Performance-Based National Detention Standards (PBNDS).

CoreCivic maintains a zero-tolerance policy for all forms of sexual abuse or assault. It is the Policy of CoreCivic to provide a safe and secure environment for all detainees, employees, contractors, and volunteers that is free from the threat of sexual abuse or assault. CoreCivic provides a Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program that ensures effective procedures for preventing, reporting, responding to, investigation, and tracking incidents or allegations of sexual abuse or assault (115.11 (a)).

When it is learned that a detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the detainee. It is CoreCivic policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse. Alleged victims of sexual abuse will be provided a supportive and protective environment.

Sexual activity between detainees or employees/contractors/volunteers and detainees, regardless of consensual status, is strictly prohibited and is subject to administrative and criminal disciplinary sanctions. (ACI 4-4281-6; 4-ALDF-4D-22-5)

DEFINITIONS:

Bad Faith - Acting with a dishonest belief or purpose.

<u>Civilian</u> – A person who is not a paid CoreCivic employee. Such individuals may include visitors, volunteers, interns, delivery truck drivers, or service personnel repairing equipment in the facility. This does not include detainee visitors.

<u>Contractor</u> – A person who provides services at the facility on a recurring basis pursuant to a contractual agreement with the agency or facility. Such individuals may include the contractor's employees who manage and operate facility departments such as health and/or food services, construction workers who are temporarily working on projects within the facility, medical professionals such as a psychiatrist or medical doctor, contract attorneys, or consultants such as a professional librarian.

<u>Detainee</u> – Any person detained in an immigration detention facility or holding facility

<u>Direct Staff Supervision</u> – Security staff in the same room with, and within reasonable hearing distance of, the detainee.

<u>Employee</u> – A person employed by CoreCivic in an approved full-time or part-time position that is designated as such in the authorized staffing pattern. For the purposes of this policy, a paid intern may be considered an employee.

<u>Exigent Circumstances</u> – Temporary unforeseen circumstance(s) that require immediate action in order to combat a threat to the security or order of a facility or security of any person.

<u>Facility Support Center (FSC)</u> – CoreCivic's corporate headquarters where employees provide support, direction and oversight in the management and operation of the company's correction, detention, residential, and community corrections facilities.

<u>FSC PREA Committee</u> – A committee comprised of senior operations, legal, and mental health managers who review issues related to PREA reporting, incident response, investigation, and prevention.

<u>FSC Prevention of Sexual Assault (PSA) Coordinator</u> – An upper-level management FSC employee designated to develop, implement, and oversee CoreCivic's companywide efforts to comply with the PREA National Standards and the company's Sexual Abuse Response and Prevention Program. He/she must provide supervisory oversight to all CoreCivic facilities ensuring coordination in the prevention, detection, intervention, investigation, and discipline/prosecution of sexual abuse as specified in this policy. (115.11 (b))

<u>Gender Non-Conforming</u> – A person whose appearance or manner does not conform to traditional societal gender expectations.

<u>LGBTI</u> – Lesbian, Gay (Homosexual), Bisexual, Transgender, and Intersex. This acronym will include the term Gender Non-Conforming.

<u>Intersex</u> – A person who has a sexual or reproductive anatomy or chromosomal pattern that does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

PREA - The Prison Rape Elimination Act 42 USC 15601 et. seq.

<u>Prevention of Sexual Assault (PSA) Compliance Manager</u> – An Administrative Duty Officer-level manager appointed by the Facility Administrator who maintains responsibility for the facility's Sexual Abuse Response and Prevention Program. The PSA Compliance Manager serves as the facility point of contact for the ICE local Field Office and ICE PSA Coordinator.

<u>PREA National Standards</u> – Part 115 of Title 6 of the Code of Federal Regulations, the Prison Rape Elimination Act National Standards, including Subpart A, Standards for Immigration Detention facilities.

<u>PREA Staffing Plan</u> – An approved plan for staffing the facility in accordance with PREA guidelines developed by the facility in conjunction with the FSC PSA Coordinator.

<u>Preponderance of the Evidence Standard</u> – An evidentiary standard under which an allegation is deemed Substantiated if the weight of the available evidence indicates that the allegation is more likely than not to be truthful or correct.

<u>Qualified Health Care Professional (QHCP)</u> – Includes physicians, physician assistants, nurse practitioners, nurses, dentists, mental health professionals, and others who, by virtue of their education, credentials, and experience are permitted by law within the scope of their professional practice to evaluate and care for patients.

<u>Qualified Mental Health Professionals (QMHP)</u> – Includes psychiatrists, psychologists, psychiatric social workers, psychiatric nurses and others who, by virtue of their education, credentials, and experience are permitted by law to evaluate and care for the mental health needs of patients.

Rape Crisis Center – An entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043q(b)(2)(C), to victims of sexual assault of all ages.

<u>SAFE/SANE Provider</u> – A Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) is a specially trained registered nurse, physician assistant, or physician who provides comprehensive care, and timely collection of forensic evidence and testimony in sexual assault cases.

<u>Detainee-on-Detainee Sexual Abuse and/or Assault</u> – Sexual abuse of a detainee by another detainee includes any of the following acts by one or more detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- Contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- Contact between the mouth and the penis, vagina or anus;
- Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- Touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- Threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

<u>Staff-on-Detainee Sexual Abuse and/or Assault</u> – Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- Contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- Contact between the mouth and the penis, vagina or anus;
- Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- Intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- Threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- Repeated verbal statements or comments of a sexual nature to a detainee;
- Any display of his or her uncovered genitalia, buttocks, or breast in the presence of a detainee, or;

Voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official
duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism:
staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring a detainee to
expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a
detainee performing bodily functions.

<u>Sexual Abuse Response Team (SART)</u> – A team comprised of four (4) or more individuals having a primary role in responding to reported incidents of sexual abuse, victim assessment and support needs, and ensuring policy and procedures are carried out that ensure detainee safety.

<u>Transgender</u> – A person whose gender identity (i.e. internal sense of feeling male or female) is different from the person's sex at birth.

PROCEDURES INDEX:

- A. PSA COMPLIANCE MANAGER
- **B. PREVENTION PROCEDURES**
- C. SUPERVISION AND MONITORING
- D. DETAINEE SCREENING, CLASSIFICATION AND REASSESSMENT
- E. HOUSING AND PROGRAM ASSIGNMENTS
- F. DETAINEE ORIENTATION AND EDUCATION
- G. LIMITS TO CROSS GENDER VIEWING AND SEARCHES
- H. TRANSPORTATION
- I. UPGRADES TO FACILITIES AND TECHNOLOGIES
- J. ACCOMMODATING DETAINEES WITH DISABILITIES OR LIMITED ENGLISH PROFICIENCY
- **K. REPORTING PROCEDURES**
- L. COORDINATED RESPONSE SEXUAL ASSAULT RESPONSE TEAM (SART)
- M. INCIDENT RESPONSE
- N. HEALTH CARE AND MENTAL HEALTH SERVICES
- O. INVESTIGATIONS
- P. DISCIPLINARY SANCTIONS
- Q. SEXUAL ABUSE INCIDENT REVIEWS, DATA COLLECTION, AND AUDITS

PROCEDURES:

A. A. PSA COMPLIANCE MANAGER

- A1. Each CoreCivic facility shall designate a Prevention of Sexual Assault Compliance Manager (PSA Compliance Manager) who shall serve as the facility point-of-contact for the local Immigration and Customs Enforcement (ICE) Field Office and the ICE PSA Coordinator. The PSA Compliance Manager must have sufficient time and authority to oversee facility efforts to comply with facility sexual abuse and assault prevention and intervention policies and procedures (115.11 (d)). The PSA Compliance Manager is responsible for the following:
- A1a. Assisting with the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program, and with keeping them current;
- A1b. Assisting with the development of initial and ongoing PREA training protocols;
- A1c. Serving as PREA liaison with other agencies;
- A1d. Coordinating the gathering of statistics and reports on allegations of sexual abuse or assault;
- A1e. Reviewing the results of investigations of sexual abuse and assist in conducting an annual review of all investigations to assess and improve prevention and response efforts; and
- A1f. Reviewing facility practices to ensure required levels of confidentiality are maintained.
- A2. CoreCivic shall designate an upper level, company-wide Prevention of Sexual Assault Coordinator (FSC PSA Coordinator) with sufficient time and authority to develop, implement, and oversee CoreCivic efforts to comply with PREA standards in all immigration detention facilities.

B. PREVENTION PROCEDURES

- B1. Confidentiality
- B1a. All information concerning an event of detainee sexual abuse is to be treated as confidential. Apart from reporting to designated supervisors or officials, employees shall not reveal any information related to a report of sexual abuse to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. This information should never be shared with other detainees.
- B1b. Appropriate controls shall be implemented within the facility regarding the dissemination of responses to questions asked pursuant to screening for risk of victimization and abusiveness in order to ensure that sensitive information is not exploited by employees or other detainees to the detainee's detriment (115.41 (g)).
- B2. Hiring and Promotion

- B2a. To the extent permitted by law, CoreCivic will decline to hire or promote any individual, and decline to enlist the services of any contractor or volunteer, who may have contact with detainees, who:
- B2a1. Has engaged in sexual abuse in a prison, jail, holding facility, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);
- B2a2. Has been convicted of engaging or attempting to engage in sexual activity facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- B2a3. Has been civilly or administratively adjudicated to have engaged in the activity as outlined above in B.2.a.2. (115.17 (a)).
- B2b. To the extent permitted by law, CoreCivic may decline to hire or promote and may terminate employment based on material omissions regarding such misconduct, or the provision of materially false information (115.17 (e)).
- B2c. All applicants, employees, and contractors who may have direct contact with detainees shall be asked about previous misconduct, as outlined above in B2a1-3., in written applications or interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees (115.17 (b)).
- B2c1. The 14-2H-DHS Self-Declaration of Sexual Abuse form will be completed upon application for employment and as part of the promotional interview process.
- B2c2. The 14-2H-DHS Self-Declaration of Sexual Abuse form shall also serve as verification of an employee's fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as described in this policy, and as outlined above in B2a1-3.
- B2c3. The 14-2H-DHS Self-Declaration of Sexual Abuse form shall be signed annually by each employee and contractor, and a copy maintained in the Human Resources Department's file.
- B2c4. The 14-2H-DHS Self-Declaration of Sexual Abuse form shall be signed annually by each volunteer and a copy maintained in the Human Resources Department's file and/or the Volunteer Services Coordinator's training file.
- B2d. Before hiring new employees who may have contact with detainees, each CoreCivic facility shall: Require a criminal records background check (115.17 (c)). CoreCivic shall further ensure that a criminal record check is completed before enlisting the services of any contractor who may have contact with detainees (115.17 (d)).
- B2e. Consistent with federal, state, and local law each CoreCivic facility shall 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 3-20-2B PREA Questionnaire for Prior Institutional Employers form shall be used to obtain such prior employment information.
- B2f. CoreCivic shall ensure that criminal background records checks are completed at least every five (5) years for current employees and contractors who may have contact with detainees (115.17 (c)).
- B2g. Unless prohibited by law, CoreCivic shall provide information on Substantiated allegations of sexual abuse involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work (115.17 (f)).
- B3. Staff Training
- B3a. Training on the facility's Sexual Abuse or Assault Prevention and Intervention Program shall be included in training for all new employees, and shall also be included in annual refresher/in-service training thereafter. (ACI 4-4084; ACI-4-4084-1; 4-ALDF-7B-08; 4-ALDF-7B-10; 4-ALDF-7B-10-1) Employee training shall ensure facility staff are able to fulfill their responsibilities under DHS standards, and shall include: (115.31)
- B3a1. The facility's zero-tolerance policies for all forms of sexual abuse (115.31 (a) (1));
- B3a2. Definitions and examples of prohibited and illegal sexual behavior (115.31 (a) (3));
- B3a3. The right of detainees and staff to be free from sexual abuse, and from retaliation for reporting sexual abuse (115.31 (a)(2));
- B3a4. Instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
- B3a5. Recognition of situations where sexual abuse and/or assault may occur (115.31 (a)(4));
- B3a6. How to avoid inappropriate relationships with detainees (115.31 (a)(6));
- B3a7. Working with vulnerable populations and addressing their potential vulnerability in the general population;
- B3a8. Recognition of the physical, behavioral and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences; (115.31 (a)(5));
- B3a9. The requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes; (115.31 (a)(9))
- B3a10. The investigation process and how to ensure that evidence is not destroyed;
- B3a11. Prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or physical disabilities;
- B3a12. How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees; (115.31 (a)(7))
- B3a13. Procedures for reporting knowledge or suspicion of sexual abuse and/or assault; (115.31 (a)(8)) and

- B3a14. Instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and or assault.
- B3b. Specialized Training
- B3b1. In addition to the general training provided to all employees, security staff shall receive training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a manner that is professional, respectful, and the least intrusive possible while being consistent with security needs (115.15 (j)).
- B3b2. The facility shall provide specialized training on sexual abuse and effective cross-agency coordination to facility investigators who conduct investigations into allegations of sexual abuse at immigration detention facilities. This training covers, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or prosecutorial referral, and information about effective cross-agency coordination in the investigation process (115.34 (a)).
- B3b3. The PSA Compliance Manager 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 a back-up during employee absences from work (e.g. leave, paid time off, sickness, offsite training, etc.) or as result of investigator vacancies.
- B3b4. In addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professionals, who work in the facility, shall receive specialized medical training as outlined below:
 - How to detect and assess signs of sexual abuse;
 - How to preserve physical evidence of sexual abuse;
 - How to respond effectively and professionally to victims of sexual abuse;
 - How and to whom to report allegations of sexual abuse; and
 - How to preserve physical evidence of sexual abuse. (115.35 (b))
- B3c. Civilians/Contractors/Volunteers
- B3c1. The facility shall ensure that all volunteers and other contractors who have contact with detainees have been trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures (115.32 (a)).
- B3c2. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees shall be notified of the facility's zero-tolerance policy and informed how to report such incidents. (115.32 (b))
- B3c3. Civilians/contractors/volunteers who have contact with detainees on a recurring basis shall be provided a copy of this policy prior to admission to the facility to begin their assignment or task.
- B3d. Training and Policy Acknowledgement Documentation
- B3d1. Employees shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the employee's training file.
- B3d2. Civilians/contractors/volunteers shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the civilian or contractor's file. (115.32 (c))
- B3d3. <u>Employees</u>: The 14-2A-DHS Policy and Training Acknowledgement form shall be completed by each employee serving as verification of the employee's review and understanding of the contents of this policy. The completed forms will be maintained by the facility Manager, Human Resources. A newly signed 14-2A-DHS Policy and Training Acknowledgement form may be required for future revisions of this policy as determined necessary by the FSC General Counsel or designee.
- B3d4. <u>Civilians/Contractors/Volunteers</u>: The 14-2A-DHS Policy and Training Acknowledgement form serves as verification of the civilian's or contractor's review and understanding of the contents of this policy and shall be completed by each civilian or contractor who has contact with detainees. The completed forms will be maintained by the facility Manager, Human Resources. A newly signed 14-2A-DHS Policy and Training Acknowledgement form may be required for future revisions of this policy as determined by the FSC General Counsel or designee.
- B3d5. Documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with CoreCivic Policies 1-15 Record Retention and 4-2 Maintenance of Training Records. (115.34 (b))

C. SUPERVISION AND MONITORING

- C1. The CoreCivic Facility Support Center (FSC) will develop, in coordination with the facility, comprehensive detainee supervision guidelines to determine and meet the facility's detainee supervision needs, and shall review those guidelines at least annually. (115.13 (b)) Each facility will ensure sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, video monitoring, to protect detainees against sexual abuse. (115.13 (a))
- C2. In calculating staffing levels and determining the need for video monitoring, the following factors shall be take into consideration:
- C2a. Generally accepted detention and correctional practices;

- C2b. Any judicial findings of inadequacy;
- C2c. All components of the facility's physical plant;
- C2d. The composition of the detainee population;
- C2e. The prevalence of Substantiated and Unsubstantiated incidents of sexual abuse;
- C2f. Recommendations of sexual abuse incident review reports; and
- C2g. Any other relevant factors, including but not limited to the length of time detainees spend in agency custody. (115.13 (c))
- C3. Annual PREA Staffing Plan Assessment
- C3a. Whenever necessary, but no less frequently than once each year, for each CoreCivic facility, an annual PREA Staffing Plan Assessment will be completed (115.13 (b)).
- C3b. The Facility PSA Compliance Manager will complete the 14-2I-DHS Annual PREA Staffing Plan Assessment and forward it to the Facility Administrator for review. Upon completion of the Facility Administrator's review, the 14-2I-DHS Annual PREA Staffing Plan Assessment will be forwarded to the FSC PREA Coordinator.
- C3c. In consultation with the respective FSC Business Unit Vice President/designee, the FSC PSA Coordinator shall assess, determine, and document whether adjustments are needed to:
- C3c1. The staffing plan established pursuant to this section;
- C3c2. The facility's deployment of video monitoring systems and other monitoring technologies; and
- C3c3. The resources the facility has available to commit to ensure adherence to the staffing plan.
- C3d. Changes to staffing, policy/procedure, physical plant, approved capital expenditures, video monitoring and/or technology require the approval of the Business Unit Vice President/designee.
- C4. Supervision
- C4a. Staff, including supervisors, shall conduct frequent unannounced security inspections rounds to identify and deter sexual abuse of detainees. The occurrence of such rounds shall be documented in the applicable log (e.g. Administrative Duty Officer, post log, shift report, etc.) as "PREA Rounds". This practice shall be implemented on all shifts (to include night, as well as day) and in all areas where detainees are permitted.
- C4b. Employees shall be prohibited from alerting other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. (115.13 (d))

D. DETAINEE SCREENING, CLASSIFICATION AND REASSESSMENT

- D1. All detainees shall be screened upon arrival at the facility for potential risk of sexual victimization or sexually abusive behavior, and shall be housed to prevent sexual abuse or assault, taking necessary steps to mitigate any such danger. (ACI 4-4281-2; 4-ALDF-4D-22-1) (115.41 (a))
- D2. Each new detainee shall be kept separate from the general population until he/she has been classified and may be housed accordingly (115.41 (a)).
- D3. The initial classification process and initial housing assignment should be completed within twelve (12) hours of admission to the facility (115.41 (b)) (ACI 4-4281-2; 4-ALDF-4D-22-1)
- D4. The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization: (115.41 (c))
- D4a. Whether the detainee has a mental, physical, or developmental disability;
- D4b. The age of the detainee;
- D4c. The physical build and appearance of the detainee;
- D4d. Whether the detainee has previously been incarcerated or detained;
- D4e. The nature of the detainee's criminal history;
- D4f. Whether the detainee has any convictions for sex offenses against an adult or child;
- D4g. Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- D4h. Whether the detainee has self-identified as having previously experienced sexual victimization; and
- D4i. The detainee's own concerns about his or her physical safety.
- D5. Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked pursuant to items listed above in section D.4. a., g., h., or i. (115.41 (f)).
- D6. The 14-2B-DHS Sexual Abuse Screening Tool or electronic OMS version will be utilized to complete the initial screening.
- D7. The initial screening shall consider prior acts of sexual abuse or assault, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse or assault, as known to the facility, in assessing detainees for risk of being sexually abusive (115.41 (d)).
- D8. The facility shall implement appropriate protections on responses to questions asked pursuant to this screening, limiting dissemination, and ensuring that sensitive information is not exploited to the detainee's detriment by staff or other detainees. (115.41 (g))

- D9. If screening indicates that a detainee has experienced prior sexual victimization or perpetrated sexual abuse, staff shall, as appropriate, ensure that the detainee is immediately referred to a qualified medical or mental health practitioner for medical and/or mental health follow-up as appropriate. (ACI 4-4281-4; ACI-4-4281-5; 4-ALDF-4D-22-3; 4-ALDF-4D-22-4)
- D9a. When a referral for *medical follow-up* is initiated, the detainee shall receive a health evaluation no later than two (2) working days from the date of assessment. (115.81 (b))
- D9b. When a referral for *mental health follow-up* is initiated, the detainee shall receive a mental health evaluation no later than seventy-two (72) hours after the referral. (115.81 (c))
- D10. Reassessment
 - The facility shall reassess each detainee's risk of victimization or abusiveness between sixty (60) and ninety (90) days from the date of the initial assessment, and at any other time when warranted based upon the receipt of additional, relevant information or following an incident of abuse or victimization. (115.41 (e))
- D10a. The reassessment of the detainee's risk level of victimization or abusiveness will be conducted by the appropriate Case Manager or a staff member designated by the Facility Administrator.
- D10b. The 14-2B-DHS Sexual Abuse Screening Tool will be used for completing the re-assessment.
- D11. Completed 14-2B-DHS forms will be maintained in the detainee's central file or electronic records, with a copy forwarded to the detainee's medical record and/or, where applicable, the detainee's electronic medical records.
- D12. Following any investigation into an allegation of sexual abuse, the necessity of filing any detainee "incompatible" or "keep separate" notices between the victim and abuser will be evaluated, such that the victim and abuser or potential abuser are kept separate while housed at the CoreCivic facility or recommend for a transfer to another facility.
- D13. The predatory detainee shall be reclassified in accordance with the applicable classification procedures.

E. HOUSING AND PROGRAM ASSIGNMENTS

- E1. The facility shall use the information from the 14-2B-DHS Sexual Abuse Screening Tool conducted at initial screening in the consideration of housing recreation, work program and other activities. (115.42 (a))
- E2. Transgender and Gender Non-Conforming
- E2a. The decision whether to assign a transgender or intersex detainee to a male facility or a female facility will generally be made by ICE prior to the detainee's arrival at a CoreCivic facility. The Facility Administrator shall consult with his/her appropriate ICE representative, CoreCivic Managing Director, and the CoreCivic FSC PSA Coordinator in the event there are concerns with a placement.
- E2b. The facility should not base housing and program placement decisions for transgender or intersex detainees solely on the identity documents or physical anatomy of the detainee. A detainee's self-identification of his/her gender and self-assessment of safety needs shall always be taken into consideration. The facility shall make individualized case-by-case determinations about how to ensure the safety of each detainee. (115.42 (a) (b)) (ACI 4-4277; 4-ALDF-6B-02)
- E2c. Upon arrival at a facility, transgender/intersex detainees shall be temporarily housed in a location away from the general population (to include a medical unit or protective custody unit) for no more than seventy-two (72) hours (excluding weekends, holidays, and exigent circumstances) until classification, housing, and other needs can be assessed (115.42 (b)).
- E2d. In deciding whether to house a transgender/intersex detainee 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 detainees, the facility shall consider the transgender or intersex detainee's gender self-identification and self-assessment of safety needs. The facility shall consult a medical or mental health professional as soon as practicable on this assessment. (115.42 (b))
- E2e. Placement and programming assignments for each transgender or intersex detainee shall be reassessed at least twice each year to review whether any threats to safety were experienced by the detainee. (115.42 (b))
- E3. Restricted Housing
- E3a. Use of Administrative Segregation to protect detainees at high risk for sexual abuse and assault shall be restricted to those instances where reasonable efforts have been made to provide appropriate housing and shall be made for the least amount of time practicable, and when no other viable housing options exist, as a last resort. (115.42 (b))
- E3b. Detainees considered at risk for sexual victimization shall be placed in the least restrictive housing that is available and appropriate. If appropriate custodial options are not available at the facility, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance. Such detainees may be assigned to Administrative Segregation for protective custody 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. (115.43 (b))
- E3c. Staff shall document detailing reasons for placement of an individual in Administrative Segregation on the basis of a vulnerability to sexual abuse and assault. (115.43 (a))
- E3d. If involuntary segregated housing is warranted as outlined above in E3b., the facility will take the following actions:

- E3d1. A supervisory staff member shall conduct a review within seventy-two (72) hours of the detainee's placement in segregation to determine whether segregation is still warranted; and
- E3d2. A supervisory staff member shall conduct, at a minimum, and identical review after the detainee has spent seven (7) days in Administrative Segregation, and every week thereafter for the first thirty (30) days and every ten (10) days thereafter. (115.43 (d)(1-2))
- E3e. Facilities shall notify the appropriate ICE Field Office Director no later than seventy-two (72) hours after the initial placement into segregation, whenever a detainee has been placed in segregation on the basis of a vulnerability to sexual abuse or assault. (115.43)
- E3f. Detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following:
- E3f1. The opportunities that have been limited;
- E3f2. The duration of the limitation: and
- E3f3. The reasons for such limitations. (115.43 (c))

F. DETAINEE ORIENTATION AND EDUCATION

- F1. During the intake process, all detainees shall be notified of the facility zero tolerance policy on sexual abuse and assault. Detainees will be provided with information (orally and in writing) about the facility's SAAPI Program. Such information shall include, at a minimum: (ACI 4-4281-1; 4-ALDF-2A-29)
- F1a. The facility's zero tolerance policy for all forms of sexual abuse or assault; (115.33 (a))
- F1b. Prevention and intervention strategies; (115.33 (a) (1))
- F1c. Definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity; (115.33 (a) (2))
- F1d. Explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the DHS/Office of Inspector General (OIG) and the ICE/Office of Professional Responsibility (OPR) investigation processes; (115.33 (a) (3))
- F1e. Information about self-protection and indicators of sexual abuse and assault (115.33 (a) (4));
- F1f. Prohibition against retaliation, including an explanation that reporting an assault shall not negatively impact the detainee's immigration proceedings (115.33 (a) (5)); and
- F1g. The right of a detainee who has been subjected to sexual abuse to receive treatment and counseling. (115.33 (a) (6))
- F2. The facility shall post on all housing unit bulletin boards the following notices: (115.33 (b))
- F2a. The DHS-prescribed sexual abuse and assault awareness notice;
- F2b. The name of the facility PSA Compliance Manager; and
- F2c. Information about local organization(s) that can assist detainees who have been victims of sexual abuse or assault, including mailing addresses and telephone numbers (toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.

AT THIS FACILITY, INFORMATION ABOUT THE FOLLOWING <u>LOCAL</u> ORGANIZATIONS IS POSTED IN THE HOUSING AREAS:

- CRISIS HOTLINE OF NEW MEXICO
- ICE DETENTION REPORTING AND INFORMATION LINE
- DHS OFFICE OF THE INSPECTOR GENERAL
- F3. The facility shall make available and distribute the DHS-prescribed "Sexual Assault Awareness Information" pamphlet. (115.33 (e))
- F4. During intake and/or orientation, detainees shall be shown the CoreCivic Video "PREA What You Need to Know" or alternative ICE-approved video. This video will be shown in both English and Spanish. Detainees must sign and acknowledge that they have seen the video.
- F5. Information about reporting sexual abuse shall be included in the detainee handbook. The detainee shall sign for receipt of the handbook and a copy placed in his/her file.
- F6. The facility shall maintain documentation of detainee participation in educational sessions pertaining to sexual abuse. (115.33 (c))

G. LIMITS TO CROSS GENDER VIEWING AND SEARCHES

- G1. Cross Gender Searches
- G1a. Whenever operationally feasible, staff conducting a search must be of the same gender, gender identity, or declared gender as the detainee being searched.

- G1b. Pat searches of male detainees by female staff shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required, or, in exigent circumstances. (115.15 (b))
- G1c. Pat searches of female detainees by male staff shall not be conducted unless in exigent circumstances. (115.15 (c))
- C1d. All cross-gender pat searches of detainees will be documented in a log book including details of exigent circumstances.
- C1e. Strip searches of detainees by staff of the opposite gender shall not be conducted except in exigent circumstances, or when performed by medical practitioners.
- C1f. Staff shall not conduct strip searches of juveniles. All such body cavity searches of juveniles shall be referred to a medical practitioner. (115.15 (e))
- C1g. An officer of the same gender as the detainee shall perform strip searches. In the case of an emergency, a staff member of the same gender as the detainee shall be present to observe a strip search performed by an officer of the opposite gender. When an officer of the opposite gender conducts a strip search which is observed by a staff member of the same gender as the detainee, staff shall document the reasons for the opposite gender search in any logs used to record searches and in the detainee's detention file.
- C1h. Body cavity searches will only be conducted by a medical professional and take place in an area that affords privacy from other detainees and from facility staff who are not involved in the search. Staff of the opposite gender, other than a designated qualified medical professional, shall not observe a body cavity search.
- G1i. All strip searches and visual body cavity searches shall be documented. If a strip search of any detainee does occur, the search shall be documented on the 5-1B Notice to Administration (NTA) (refer to CoreCivic Policy 5-1 Incident Reporting). (115.15 (f))
- G2. Cross Gender Viewing
- G2a. Detainees shall be able to shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine cell checks or is otherwise appropriate in connection with a medical examination or monitored bowel movement. (115.15 (g))
- G2b. The facility shall post notices/rules that prohibit detainees from disrobing or being unclothed in common areas. Cameras focused on common areas, including dormitory sleeping units, may be monitored by either gender.
- G2c. Cameras that capture areas in which detainees 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 detainees viewed through the camera. These areas may be digitally obscured if possible and monitored by either gender.
- G2d. Employees of the opposite gender must announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing. (115.15 (g))
- G2e. Suicide Watch
 - Cross gender staff may only be assigned to a suicide watch, including constant observation, provided that the facility has procedures in place that enable the detainee on suicide watch to avoid exposing himself or herself to non-medical cross gender staff.
- G2e1. Same gender correctional staff or medical staff may be substituted to observe the periods of time when the detainee is showering, performing bodily functions, or changing clothes.
- G2e2. A shower with a partial curtain, or other privacy shields, may be provided or, if the suicide watch is being conducted via live video monitoring, an appropriate portion of the cell must be digitally obscured. Any privacy accommodations must be implemented in a way that does not pose a safety risk for the individual on suicide watch. The privacy standards apply whether the viewing occurs in a cell or elsewhere.
- G3. Transgender Searches and Viewing
- G3a. The facility shall not search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. If the detainee's genital status is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. (115.15 (e) and 115.215 (e); DHS 115.15 (i))
- G3b. The gender of the staff member searching a transgender or intersex detainee will depend on the specific needs of the individual detainee and on the operational concerns of the facility. Under most circumstances, this will be a case-by-case determination, which may change over the course of incarceration and should take into consideration the gender expression of the detainee.
- G3c. Transgender Pat Searches and Strip Searches
 - There are three (3) options for pat searches and strip searches of transgender or intersex detainees:
- G3c1. Pat searches and strip searches conducted only by medical staff;
- G3c2. Asking detainees identified as transgender or intersex to identify the gender of staff with whom they would feel most comfortable conducting the pat search and/or strip search; and
- G3c3. Pat searches and strip searches conducted in accordance with the detainee's gender identity.

- G3d. Whenever possible, transgender detainees shall be permitted to choose the gender of the medical professional conducting a body-cavity search.
- G3e. Pat searches and strip searches of transgender detainees may be conducted by any staff based upon exigent circumstances. Details of the exigent circumstances must be logged.
- G3f. Detainees shall not be permitted to spontaneously change their transgender or intersex status, and/or gender identity to avoid being pat searched or strip searched. These individuals shall immediately be referred back to the SART.
- G3g. All searches of transgender and intersex detainees shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety. (115.15 (f))
- G3g1. Requiring two (2) staff to search transgender detainees would be more intrusive than necessary.
- G3g2. It is not acceptable to have a male staff member search one half of the body of a detainee and a female staff member search the other half.
- G3g3. Searches of breasts shall be conducted using the back of the hand.
- G3g4. Requests for transgender detainees to remove appearance related items such as prosthetics, clothing that may convey gender identity, wigs, and cosmetics shall be consistent with requirements for the removal of similar items for other non-transgender detainees.
- G3g5. Strip searches shall be made in a manner designed to ensure as much privacy to the detainee as practicable. Staff should consider the physical layout of the institution, and the characteristics of a transgender/intersex detainee to adjust conditions of the visual search as needed for the detainee's privacy.
- G3h. Transgender and intersex detainees shall be given the opportunity to shower separately from other detainees. 115.15 (g))
- G3h1. The degree of separation required is dependent on the layout of the facility, and may be accomplished either through physical separation (e.g. separate shower stalls) or by time-phasing or scheduling (e.g. allowing a detainee to shower before or after others).
- G3h2. The number of separate showers per day and the time of day for showering separately may be limited due to institutional need.
- G3h3. Staff shall use discretion in determining whether or not to temporarily grant requests to shower separately made by newly arrived detainees who have been identified as transgender or intersex, and have further review pending.

H. TRANSPORTATION

- H1. Detainees identified as being "at risk" for sexual victimization shall be transported in accordance with that special safety concern.
- H2. Transportation staff shall seat each detainee in accordance with written procedures from the Facility Administrator (see PBNDS procedures outlined in CoreCivic Policy 9-18 Transportation and Offsite Post Operations), with particular attention to detainees who may need to be afforded closer observation for their own safety.

I. UPGRADES TO FACILITIES AND TECHNOLOGIES

- 11. 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 to protect detainees from sexual abuse. Such considerations shall be documented on 7-1B PREA Physical Plant Considerations form. (115.18 (a))
- 12. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how such technology may enhance the ability to protect detainees from sexual abuse. Such considerations shall be documented on the 7-1B PREA Physical Plant Considerations form. (115.18 (b))

J. ACCOMMODATING DETAINEES WITH DISABILITIES OR LIMITED ENGLISH PROFICIENCY

- J1. Detainees with Disabilities
- J1a. The facility shall ensure that detainees with disabilities (including, but not limited to, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. (115.16 (a) and 115.33 (b)) (4-ALDF-6B-02; ACI 4-4277)
- J1b. When necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision, the facility shall attempt to accommodate the detainee by providing: (115.16 (b))
- J1b1. Access to in-person, telephonic, or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary;
- J1b2. Access to written materials related to sexual abuse in formats or through methods that ensure effective communication; and

- J1b3. Auxiliary aids such as readers, materials in Braille (if available), audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers.
- J2. Detainees with Limited English Proficiency (LEP)
- J2a. The facility will provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities. (115.33 (b))
- J2b. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.
- J2c. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and ICE determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse. (115.16 (c))
- J2d. Detainees with LEP will be provided in-person or telephonic interpretation services. The facility will provide access to the Language Line or other similar translation service at no cost to the detainee.
- J2e. Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for any significant segments of the population with LEP. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.
- J2f. Information provided to detainees will be available in both English and Spanish, including, but not limited to:
- J2f1. Written information provided to detainees at intake and orientation;
- J2f2. PREA information posted on housing unit bulletin boards; and
- J2f3. Informational videos.

K. REPORTING PROCEDURES

K1. Detainee Reporting

Detainees shall be encouraged to immediately report pressure, threats, or incidents of sexual abuse and assault, as well as possible retaliation by other detainees or employees for reporting sexual abuse and staff neglect, or, violation of responsibilities that may have contributed to such incidents. (115.51 (a))

- K2. The facility shall provide instructions on how detainees may contact their consular official, the DHS Office of the Inspector General, and the ICE Hotline. Reporting will be confidential, and if desired, anonymous. (115.51 (a))
- K3. Detainees who are victims of sexual abuse have the option to privately report an incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods: (115.51 (a) and (c)) (ACI 4-4281-7; 4-ALDF-4D-22-7)
- K3a. Submitting a request to meet with Health Services staff and/or reporting to a Health Services staff member during sick call:
- K3b. Calling the facility twenty-four (24) hour toll-free notification telephone number;
- K3c. Verbally telling any employee, including the facility Chaplain;
- K3d. Forwarding a letter (including anonymously), sealed and marked "confidential", to the Facility Administrator or any other employee;
- K3e. Calling or writing someone outside the facility who can notify facility staff;
- K3f. Forwarding a letter to the CoreCivic FSC PSA Coordinator at the following address:

10 Burton Hills Boulevard Nashville TN 37215

- K4. ICE has established the following reporting methods:
- K4a. Directly report to the US Department of Homeland Security (DHS) Office of the Inspector General (OIG) complaint hotline toll-free telephone number at 1-800-323-8603 (this number also has an option to report outside of ICE). The phone number and pertinent information are securely posted inside each housing unit for 24/7 access. (115.51 (b))
- K4b. Contact the ICE Detention and Reporting Information Line (DRIL) toll-free telephone number 1-888-351-4024 or 9116#. Language assistance is available.
- K4c. Tell an ICE/Enforcement and Removal Operations (ERO) staff member who visits the facility.
- K4d. Write a letter reporting the sexual misconduct to the ICE officer in charge, ICE Assistant Field Office Director, or ICE Field Office Director. To ensure confidentiality use special mail procedures.
- K4e. File a written formal request or emergency grievance to ICE.
- K4f. Contact the ICE Office of Professional Responsibility (OPR) Joint Intake Center (JIC) toll-free hotline number (1-877-246-8253 or e-mail joing.intake@dhs.gov:

DHS Office of Inspector General Attention: Office of Investigations Hotline 245 Murray Drive, SW Building 410/Mail Stop 0305 Washington DC 20528

- K5. Formal Grievances filed by detainees involving allegations of an immediate threat to a detainee's health, safety, or welfare, related to sexual abuse will be removed from the grievance process and will be forwarded immediately to the facility investigator or Administrative Duty Officer.
- K5a. Detainees will be permitted to file a formal grievance related to sexual abuse at any time during, after, or in lieu of lodging an informal grievance or complaint.(115.52 (a))
- K5b. To prepare a grievance a detainee may obtain assistance from another detainee, the housing officer or other facility staff, family members, or legal representatives (115.52 (f).
- K5c. The facility shall not impose a time limit on when a detainee may submit a grievance regarding an allegation of sexual abuse (115.52 (b)).
- K5d. Facility staff shall bring medical emergencies to the immediate attention of proper medical personnel for further assessment. (115.52 (d))
- K5e. The facility shall issue a decision on the grievance within five (5) days of receipt and shall respond to an appeal of the grievance decision within thirty (30) days (115.52 (e)).
- K5f. The facility shall send all grievances related to sexual abuse and the facility's decisions with respect to such grievances to the appropriate ICE Field Office Director at the end of the grievance process (115.52 (e))
- K6. Anonymous Reporting

Detainees shall have at least one way to report sexual abuse to a public or private entity or office that is not part of CoreCivic, and that is able to receive and immediately forward detainee reports of sexual abuse and assault to facility officials, allowing the detainee to remain anonymous upon request (115.51 (a))

AT THIS FACILITY, DETAINEES MAY ANONYMOUSLY REPORT ABUSE THROUGH THE FOLLOWING METHOD(S):

DHS OFFICE OF THE INSPECTOR GENERAL (OIG) TOLL-FREE HOTLINE NUMBER AT 1-800-323-8603. (THIS NUMBER ALSO PROVIDES AN OPTION TO REPORT OUTSIDE OF ICE.)

- K7. Employee Reporting Duties
- K7a. Staff members who become aware of alleged sexual abuse shall immediately follow the reporting requirements set forth in section L. Coordinated Response/Sexual Abuse Response Team (SART), and section M. Response Procedures (115.61 (b)).
- K7b. The facility shall require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse that occurred in a facility, retaliation against detainees or staff who reported or participated in an investigation about such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. (115.61 (a))
- K7c. Employees shall take all allegations of sexual abuse and assault seriously, including verbal, anonymous and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.
- K7d. When it is learned that a detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the detainee (115.62).
- K7e. Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive, and non-judgmental.
- K7f. Employees are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or assault that occurred in the facility in accordance with this policy, whether or not the area is under CoreCivic management authority.
- K7g. Employees who fail to report allegations may be subject to disciplinary action.
- K7h. Apart from reporting to designated supervisors or officials, employees shall 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. (115.61 (c))
- K7i. Employees may privately report sexual abuse and assault of detainees by forwarding a letter, sealed and marked "Confidential", to the Facility Administrator. (115.61 (a))
- K7j. Reports of Sexual Abuse may also be reported to the CoreCivic Ethics Hotline at www.CoreCivic.ethicspoint.com.
- K7k. At the initiation of providing medical care, both medical and mental health professionals will inform detainees of their professional duty to report and the limitations of confidentiality. (115.61 (c))
- K7I. Medical and mental health practitioners shall obtain informed consent from the detainee before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the detainee is under the age of

- eighteen (18) (115.81 (e)).
- K7m. If the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws. (115.61 (d))
- K8. Third Party Reporting

The facility shall establish a method to receive third-party reports of sexual abuse and assault and shall post this information on the facility PREA link. (115.54)

AT THIS FACILITY, THIRD PARTY REPORTS OF SEXUAL ABUSE MAY BE MADE AS FOLLOWS:

- a. <u>DHS OFFICE OF THE INSPECTOR GENERAL (OIG) TOLL-FREE HOTLINE NUMBER</u> AT 1-800-323-8603;
- b. OFFICE OF PROFESSIONAL RESPONSIBILITY (OPR) JOINT INTAKE CENTER (JIC) TOLL-FREE HOTLINE NUMBER 1-877-246-8253 or E-MAIL joint.intake@dhs.gov; AND
- c. CALL THE CORECIVIC TWENTY-FOUR (24) HOUR ETHICS LINE: 1-866-757-4448, OR VISIT www.CoreCivic.ethicspoint.com.

L. COORDINATED RESPONSE AND SEXUAL ABUSE RESPONSE TEAM

- L1. Each CoreCivic facility will establish a Sexual Abuse Response Team (SART) to identify roles and provide a coordinated response to incidents of sexual abuse. The SART shall include the following multi-disciplinary team (115.65) (a) (b)):
- L1a. PSA Compliance Manager;
- L1b. Medical representative;
- L1c. Security representative;
- L1d. Mental health representative; and
- L1e. Victim Services Coordinator.

NOTE: The medical and/or mental health professional may serve as the facility's Victim Services Coordinator. The Victim Services Coordinator will not be a member of security.

- L2. The SART responsibilities shall include, but are not limited to, the following:
- L2a. Responding to reported incidents of sexual abuse and assault;
- L2b. Responding to victim assessment and support needs;
- L2c. Ensuring policy and procedures are enforced to enhance detainee safety; and
- L2d. Participating in the development of practices and/or procedures that encourage prevention and intervention of sexual abuse and assault and enhance compliance with DHS PREA Standards. (115.65 (b))
- L3. SART Member Responsibilities
- L3a. The PSA Compliance Manager will:
- L3a1. Review the facility's response to sexual abuse and assault allegations, with the Facility Administrator or designee, to ensure the policy is implemented effectively and victim needs are addressed;
- L3a2. Ensure appropriate incident reports are completed in accordance with CoreCivic Policy 5-1 Incident Reporting;
- L3a3. Serve as a primary liaison with local law enforcement or delegate this responsibility to the facility investigator;
- L3a4. Ensure that thirty/sixty/ninety (30/60/90) day monitoring is conducted by the designated staff, following a report of an allegation of sexual abuse and assault; and
- L3a5. Ensure that medical and mental health referrals are completed.
- L3b. The medical representative will:
- L3b1. Ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and
- L3b2. Address any ongoing medical care needs following the incident.
- L3c. The security representative will:
- L3c1. Ensure detainee safety needs are addressed, including separating the alleged victim and perpetrator; and
- L3c2. Ensure employee responses to reports of sexual abuse and assault are timely and consistent with policy.
- L3d. The mental health representative will:
- L3d1. Ensure the alleged victim is assessed;
- L3d2. Ensure mental health needs are addressed according to policy and local procedure; and
- L3d3. Ensure follow-up evaluations have been conducted
- L3e. The Victim Services Coordinator will:

- L3e1. Attempt to obtain the services of a victim advocate from a rape crisis center to assist the alleged victim; however, (the victim may choose to decline to access a victim advocate). A victim advocate can be requested at any time following an allegation of sexual abuse or assault; there is no time limitation;
- L3e2. In the absence of a victim advocate, provide detainees with confidential emotional support services related to sexual abuse and assault; however, prior to rendering such services, the Victim Services Coordinator must receive documented training in crisis intervention;
- L3e3. Ensure that detainees are aware they may access additional victim resources through community victim resource agencies; and
- L3e4. Ensure that alleged victims are informed of their rights to care and protection from further victimization.
- L3e5. If a victim of sexual abuse and assault is transferred between facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services. (115.65 (c))

M. INCIDENT RESPONSE

- M1. Upon learning of an allegation that a detainee was sexually abused, the first security staff member to respond to the report, or his or her supervisor, shall ensure that the alleged victim and perpetrator are separated and that the alleged victim is kept safe, and has no contact with the alleged perpetrator. The responder shall, to the greatest extent possible, preserve and protect any crime scene until appropriate steps can be taken to collect evidence (115.64 (a) (1) (2)).
- M2. Alleged victims shall be immediately escorted to the Health Services Department. (115.64 (a)(1)) The Health Services Department is responsible for medical stabilization and assessment of the victim until transported to an outside medical provider if determined necessary for medical treatment.
- M3. If medically indicated, or necessary for the collection of evidence as determined by law enforcement, victim examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE). If a SAFE or SANE provider is not available, the examination may be performed by other qualified medical practitioners. Facility security staff shall transport the detained to the location where such services are provided.
- M4. If the abuse occurred within a time period that still allows for the collection of physical evidence, employees shall, request that the alleged victim not take any actions that could destroy physical evidence including as appropriate washing, brushing teeth, showering, changing clothing without medical supervision, urinating, defecating, smoking, drinking or eating. (115.64 (a)(3))
- M5. When the alleged perpetrator is a detainee, he/she shall be removed from the general population or otherwise separated and held in a medical unit in the event evidence collection is required. If the abuse occurred within a time period that still allows for the collection of physical evidence, responders shall, ensure that the alleged perpetrator not take any actions that could destroy physical evidence including as appropriate washing, brushing teeth, showering, changing clothing without medical supervision, urinating, defecating, smoking, drinking or eating. (115.64 (a)(3))
- M6. If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and notify security staff. (115.64 (b))
- M7. Responding staff shall notify the highest ranking authority on site. The PSA Compliance Manager, Facility Administrator and/or Administrative Duty Officer (ADO) shall be immediately notified of the allegation by the highest ranking authority.
- M8. While in the Health Services Department, a brief statement shall be obtained from the alleged victim concerning the incident. Based upon the alleged victim's statement regarding the location and time of the incident, staff shall ensure that any crime scene is preserved. These actions shall include the following:
- M8a. Sealing access to the immediate area of the scene, if possible;
- M8b. Photographing the scene and visible evidence at the scene (e.g. tissue or blood); and
- M8c. Securing any available recorded video footage of the affected area.
- M9. All allegations of sexual abuse shall be promptly reported to a law enforcement agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. (115.22 (d)) The highest ranking authority on site or the Shift Supervisor shall notify law enforcement

AT THIS FACILITY, THE FOLLOWING LAW ENFORCEMENT AGENCIES ARE NOTIFIED IN ACCORDANCE WITH PREA STANDARD 115.22 (e):

MILAN POLICY DEPARTMENT

- M9a. The individual notifying the law enforcement agency shall request guidance from that agency as to whether a SAFE/SANE exam is required, preserving the crime scene and coordinating an investigation. The referral to law enforcement shall be documented on the 14-2C Sexual Abuse Incident Check Sheet.
- M9b. Investigations shall not be initiated by the facility investigator or other facility staff until law enforcement has been notified and has informed the facility whether they (i.e. law enforcement) will handle the investigation
- M9c. The alleged perpetrator shall be removed from the general population pending the investigation into the allegation and shall remain separated/isolated from the alleged victim until completion of the investigation.
- M9d. Video recordings of the alleged crime scene made at the known time of the incident shall be secured and preserved.

- M9e. Employees, contractors, or volunteers suspected of being the alleged perpetrator of sexual abuse shall be removed from all duties requiring detainee contact pending the outcome of the investigation.
- M10. ICE Notifications
- M10a. When a detainee, of the facility in which an alleged detainee victim is housed, is alleged to be the perpetrator of detainee sexual abuse, the facility shall ensure that the incident is promptly reported to the Joint Intake Center, the ICE Office of Professional Responsibility or the DHS Office of Inspector General, as well as the appropriate ICE Field Office Director/designee. (115.22 (e))
- M10b. When a staff member, contractor, or volunteer is alleged to be the perpetrator of detainee sexual abuse, the facility shall ensure that the incident is promptly reported to the Joint Intake Center, the ICE Office of Professional Responsibility or the DHS Office of Inspector General, as well as to the appropriate ICE Field Office Director/designee, and to any local government entity or contractor that owns or operates the facility (115.22 (e)).
- M11. Protection Against Retaliation
- M11a. Staff, contractors, volunteers, and detainees shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force. (ACI 4-4281)
- M11b. For at least ninety (90) days following a report of sexual abuse, the facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include detainee disciplinary reports, housing or program changes, or negative performance reviews, or reassignments of staff. The facility shall continue such monitoring beyond ninety (90) days if the initial monitoring indicates continuing need.
- M11c. The PSA Compliance Manager shall ensure that thirty/sixty/ninety (30/60/90) day retaliation monitoring is conducted by the designated staff, following a report of sexual abuse, to protect against potential retaliation against detainees or employees. This shall include periodic status checks of detainees and review of relevant documentation. Monitoring is documented on the 14-2D DHS PREA Retaliation Monitoring Report (30/60/90) form.
- M12. Post Allegation Protective Custody
- M12a. The facility shall take care to place detainee victims of sexual abuse in a supportive environment that represents the least restrictive housing option possible. (115.68)
- M12b. Detainee victims shall not be held for longer than five (5) days in any type of administrative segregation, except in unusual circumstances or at the request of the detainee.
- M12c. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a re-assessment taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse
- M13. Reporting to Other Confinement Facilities
- M13a. Upon receiving an allegation that a detainee currently at the facility was sexually abused while housed at another facility (e.g. state, federal, local, or other private operator) the following actions shall be taken:
- M13a1. The Facility Administrator of the facility that received the allegation shall contact the Facility Administrator or appropriate headquarters 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. (115.63 (a)(b))
- M13a2. A copy of the statement of the detainee shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.
- M13a3. The facility shall document that it has provided such notification through the 5-1B Notice to Administration (NTA). (115.63 (c))
- M13b. Upon receiving notification from another agency or another facility (e.g. state, federal, local, or other private operator) that a detainee currently at their facility reported an incident/allegation of sexual abuse that occurred while the subject was a detainee at the CoreCivic facility, the following actions shall be taken:
- M13b1. The facility shall record the name of the agency making the contact, and any information (names, dates, time) that may assist in determining whether an investigation was conducted. A detainee statement should be requested.
- M13b2. If the allegation was reported and investigated in accordance with CoreCivic policy and/or referred for criminal investigation, if appropriate, the facility shall document the allegation, the name and title of the person reporting the information, and that the allegation has already been addressed. Under this circumstance, further investigation and notification need not occur.
- M13b3. If the allegation was not reported and/or not investigated, facility staff shall initiate reporting and investigation procedures in accordance with this policy. The incident shall be reported through the 5-1 Incident Reporting Database (IRD).
- M13b4. Notification shall be made to the ICE Field Office Director/designee. (115.63 (d))
- M14. Incident Review
- M14a. A preliminary review of the incident and the response shall be conducted telephonically within seventy-two (72) hours (excluding weekends and holidays) following reportable PREA incidents of Employee-on-Detainee Sexual Abuse and

Detainee-on-Detainee Sexual Abuse. Upon receipt of the electronic 5-1 Incident Report, the review will be scheduled by the FSC Administrative Assistant, Facility Operations, responsible for the facility.

M14b. Employee-on-Detainee Sexual Abuse - Required Participants

- Managing Director/designee;
- FSC PSA Coordinator/designee;
- Facility Administrator;
- Facility PSA Compliance Manager; and
- Facility Investigator.

M14c. **Detainee-on-Detainee Sexual Abuse** – Required Participants

- Managing Director/designee (optional);
- FSC PSA Coordinator/designee;
- Facility Administrator;
- Facility PSA Compliance Manager; and
- Facility Investigator.
- M14d. Optional participants for review calls would be any staff identified by the Facility Administrator if their participation is necessary to provide specialized information essential to complete the review, and any FSC PREA Committee Members.

M14e. **Review Protocol** – At a minimum, the review shall include:

- Discussion of the incident, and whether the incident response meets applicable standards;
- Appropriate categorization of the incident report;
- Completion of required notifications;
- A request for law enforcement involvement (if appropriate);
- Whether employee actions or failures to act contributed to the sexual abuse; and
- Initial discussion as to whether the incident is Substantiated, Unsubstantiated, Unfounded, or will remain pending.

N. HEALTH CARE AND MENTAL HEALTH SERVICES

- N1. Procedures
- N1a. Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. (115.82 (a)) (ACI 4-4406M; 4-ALDF-4D-22-6M)
- N1b. Transportation of an alleged victim for emergency care, or other services provided offsite, shall be arranged in a manner that takes into account the special needs of victimized detainee.
- N1c. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention. 115.83 (a) (4-ALDF-4D-22-4)
- N1d. The facility shall provide victims with medical and mental health services consistent with the community level of care. (115.83 (c))
- N1e. The evaluation and treatment of such victims shall 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. (115.83 (b)) (4-ALDF-4D-22-4)
- N1f. Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services. (115.83 (d)) (ACI 4-4406M; 4-ALDF-4D-22-6M)
- N1g. Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate. (115.83 (e)) (ACI 4-4406M; 4-ALDF-4D-22-6M)
- N1h. The facility shall attempt to conduct a mental health evaluation of all known Detainee-on-Detainee abusers within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. (115.83 (g)) (4-ALDF-4D-22-3; ACI 4-4406M; 4-ALDF-4D-22-6M)
- N1i. All treatment services, both emergency and ongoing, 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. The facility shall provide such victims with medical and mental health services consistent with the community level of care. (115.82 (b) and 115.83 (f))
- N2. Victim Advocates and Access to Outside Confidential Support Services
- N2a. CoreCivic shall maintain, or attempt to enter into, Memorandums of Understanding (MOU) or other agreements with community service providers or, if local providers are not available, with national organizations that provide legal advocacy and confidential emotional support for immigrant victims of crimes. (115.53 (a)) Before developing or attempting to enter into an MOU, the facility shall contact the CoreCivic FSC Legal Department. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

- N2b. Each facility shall establish, in writing, procedures to include outside agencies in the facility sexual abuse prevention and intervention protocols, if such resources are available. (115.53 (b))
- N2c. Detainees shall be provided access to outside victim advocates for emotional support services related to sexual abuse. Detainees will be provided with mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. Such information shall be included in the facility's Detainee Handbook. The facility shall enable reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. (115.53 (c))

AT THIS FACILITY, THE FOLLOWING COMMUNITY AGENCIES PROVIDE CONFIDENTIAL SUPPORT SERVICES:

Rape Crisis Center of Central New Mexico
Albuquerque SANE Collaborative

- N2d. The facility shall require that agencies providing confidential support services inform detainees, prior to rendering services, of the extent to which communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. (115.53 (d))
- N2e. As requested by the victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews. (115.21 (d))

O. ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS

The Facility Administrator shall ensure that an administrative investigation and a referral for a criminal investigation, if potentially criminal behavior is involved, are completed for all allegations of sexual abuse or assault. Criminal investigations shall be referred to a law enforcement agency with legal authority to conduct criminal investigations. All investigations into alleged sexual abuse must be conducted by qualified investigators. (115.22 (a) (d) 115.71 (a)) (ACI 4-4281-3; 4-ALDF-4D-22-2)

- O1. Administrative Investigations/Facility Responsibilities
- O1a. Upon conclusion of a criminal investigation where the allegation was Substantiated, an administrative investigation shall be conducted. Upon conclusion of a criminal investigation where the allegation was Unsubstantiated, the facility shall review any available completed criminal investigation reports to determine whether an administrative investigation is necessary or appropriate (115.71 (b)).
- O1b. Administrative investigations shall be conducted after consultation with the appropriate investigative office within ICE/DHS, and the assigned criminal investigative entity.
- O1c. Administrative investigations will include:
- O1c1. Preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; (115.71 (c) (1) (i))
- O1c2. Interviewing alleged victims, suspected perpetrators, and witnesses; (115.71 (c) (1) (ii))
- O1c3. Reviewing prior complaints and reports of sexual abuse and assault involving the suspected perpetrator (115.71 (c) (1) (iii));
- O1c4. Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, and without requiring any detainee who alleges sexual abuse and assault to submit to a polygraph; (115.71 (c) (1) (iv))
- O1c5. An effort to determine whether actions or failures to act at the facility contributed to the abuse; (115.71 (c) (1) (v))
- O1c6. Documentation of each investigation by written report, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessment and investigation facts and findings; and (115.71 (c) (1) (vi))
- O1c7. Retention of all reports and referrals of allegations for as long as the alleged perpetrator is detained or employed by the agency or facility, plus five (5) years. (115.22 (b) 115.71 (c) (1) (vii))
- O1d. When an administrative investigation is undertaken, the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse and assault are Substantiated (115.72)).
- O1e. The departure of the alleged perpetrator or victim from the employment or control of the facility shall not provide a basis for terminating an investigation (115.71 (e)).
- O1f. When outside agencies conduct investigations of sexual abuse and assault, the facility shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. (115.71 (f))
- O2. Responsibilities in Criminal Investigations
- O2a. The facility shall attempt to enter into a written Memorandum of Understanding (MOU) with the outside investigating agency or entity outlining the roles and responsibilities of both the facility and the investigating entity in performing sexual abuse investigations.

AT THIS FACILITY, THE FOLLOWING LAW ENFORCEMENT AGENCY CONDUCTS CRIMINAL INVESTIGATIONS:

- O2b. The facility investigator, as delegated by the PSA Compliance Manager and/or Facility Administrator, shall establish a relationship with local law enforcement agencies and prosecutors to develop a clear understanding of the investigative guidelines and procedures during a criminal investigation of an alleged sexual abuse and assault incident.
- O2c. Discussions with ICE and local law enforcement should articulate a delineation of roles of the facility investigator and the law enforcement investigator to coordinate and sequence administrative and criminal investigations, to ensure that the criminal investigation is not compromised by an internal administrative investigation (115.71 (c) (2)).
- O2d. Facility employees will assist the local law enforcement by preserving the integrity of the evidence so that cases are not lost based on lack of evidence, improper technique, and/or lack of credibility.
- O2e. Procedures contained in this policy on the conduct of administrative investigations and coordination are subject to the approval of ICE (115.71 (d)).
- O3. Responsibilities of the Investigating Entity/Forensic Medical Exams
 - Investigations conducted by a facility employee for allegations of sexual abuse and assault will be handled in accordance with the Code of Federal Regulations, Title 6, Part 115.21, Evidence Protocol and Forensic Medical Examinations. If the facility is not responsible for investigating such allegations, the facility shall request through the Memorandum of Understanding that the responsible outside agency or entity (i.e. state or local law enforcement, contracting agency, etc.) comply with these requirements. (115.21 (e))
- O3a. The investigating entity shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. (115.21 (a))
- O3b. The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic" protocols developed after 2011. (115.21 (a))
- O3c. The investigating entity shall offer all victims of sexual abuse and assault access to forensic medical examinations, whether onsite or at an outside facility, without financial cost, where evidentiary or medically appropriate and only with the detainee's consent. Such examinations shall be performed by a SAFE or SANE where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The investigating entity shall document its efforts to provide SAFEs or SANEs. (115.21 (c)) (ACI 4-4406M; 4-ALDF-4D-22-6M)

AT THIS FACILITY, DETAINEES ARE TRANSPORTED TO THE FOLLOWING LOCATION FOR A SAFE/SANE EXAM:

| UNIVERSITY OF NEW MEXICO HOSIPTAL | |
|-----------------------------------|--|
| | |

O3d. The investigating entity shall attempt to make available to the victim a victim advocate from a rape crisis center. The investigating entity may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a non-governmental entity that provides similar victim services. (115.21 (b))

AT THIS FACILITY, VICTIM ADVOCACY SERVICES ARE PROVIDED BY THE FOLLOWING COMMUNITY AGENCY:

| NONE | |
|------|--|
| | |

- O3e. If the agency listed above in section N3d. is not available to provide victim advocate services, the investigating entity may make available a qualified staff member from a community-based organization, or a qualified investigating entity staff member, to provide these services.
- O3f. As requested by the victim, either the victim advocate, a qualified investigating entity staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. (115.21 (d))
- O4. Incident Classification
- O4a. Following completion of the investigation, the allegation will be classified as follows:
- O4a1. **Substantiated** An incident shall be classified as substantiated if the results of the investigation determine that the allegation did occur.
- O4a2. **Unsubstantiated** An incident shall be classified as unsubstantiated if the results of the investigation determine that the evidence was insufficient to make a final determination of whether or not the allegation occurred.
- O4a3. **Unfounded** An incident shall be classified as unfounded if the results of the investigation determine the allegation did not occur.
- O4b. The Facility Administrator will determine the appropriate classification of the incident and ensure that the 5-1E PREA Reporting form (refer to CoreCivic Policy 5-1 Incident Reporting) is completed and maintained with the incident packet.
- O5. Reporting to Detainees
- O5a. Following an investigation into a detainee's allegation that he/she suffered sexual abuse at the facility, the detainee shall be notified of the result of the investigation and any responsive action taken. 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 detainee. (115.73)

O5b. All detainee notifications or attempted notifications shall be documented on the 14-2E Detainee Allegation Status Notification. The detainee shall sign the 14-2E Detainee Allegation Status Notification verifying that such notification has been received. The signed 14-2E Detainee Allegation Status Notification shall be filed in the detainee's file.

P. DISCIPLINARY SANCTIONS

- P1. Detainee Discipline
- P1a. In addition to the forms of sexual abuse and/or assault defined in the Definitions section of this policy, all other sexual conduct including consensual sexual conduct between detainees is prohibited and subject to disciplinary sanctions. However, staff should be sensitive to the possibility that seemingly consensual behavior may have involved coercion by either person involved.
- P1b. Detainees shall be subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that the detainee engaged in sexual abuse or assault (115.78 (a).
- P1c. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the detainee's disciplinary history, and the sanctions imposed for comparable offenses by other detainees with similar histories. (115.78 (b))
- P1d. If a detainee is mentally disabled or mentally ill, but competent, the disciplinary process shall consider whether the detainee's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
- P1e. Because the burden of proof is substantially easier to prove in a detainee's disciplinary case than in a criminal prosecution, a detainee may be institutionally disciplined even though law enforcement officials decline to prosecute.
- P1f. A detainee may be disciplined for sexual conduct with an employee only upon a finding that the employee did not consent to such contact. (115.78 (e))
- P1g. Deliberate False Allegations

Detainees who deliberately allege false claims of sexual abuse can be disciplined. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (115.78(f)) The Facility Administrator or designee may contact law enforcement to determine if a deliberately false accusation may be referred for prosecution.

- P2. Employee Discipline
- P2a. Staff suspected of perpetrating sexual abuse shall be removed from all duties requiring detainee contact pending the outcome of an investigation. (115.66)
- P2b. Employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic's sexual abuse policies. Termination is the presumptive disciplinary sanction for staff who have engaged in, attempted, or threatened to engage in sexual abuse. (115.76 (a)(b)) (ACI 4-4281-6; 4-ALDF-4D-22-5)
- P2c. Disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse (other than actually engaging in sexual abuse) 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. (115.76 (a)) (ACI 4-4281-6; 4-ALDF-4D-22-5)
- P2d. All terminations for violations of CoreCivic sexual abuse 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, to the extent known. (115.76 (c) and (d))
- P2e. The facility shall also report all such incidents of Substantiated abuse, removals, or resignations in lieu of removal to the ICE Field Office Director, regardless of whether the activity was criminal, and shall make reasonable efforts to report such information to any relevant licensing bodies, to the extent known.
- P3. Civilians/Contractors/Volunteers
- P3a. Contractors and civilians suspected of perpetrating sexual abuse shall be removed from all duties requiring detained contact pending the outcome of an investigation. (115.66 and 115.77 (b)) (ACI 4-4281-6; 4-ALDF-4D-22-5)
- P3b. Any contractor or volunteer who has engaged in sexual abuse or assault shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse or assault, but have violated other provisions within these standards. (115.77 (c))
- P3c. Incidents of Substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. (115.77 (a))
- P3d. The facility shall report such incidents to the ICE Field Office Director/designee regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known. (115.77 (a))

Q. SEXUAL ABUSE INCIDENT REVIEWS, DATA COLLECTION AND AUDITS

- Q1. Incident Review Procedures
- Q1a. The Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation and, where the allegation was not determined to be Unfounded, prepare a written report within thirty (30) days of the conclusion of the investigation. (115.86 (a))
- Q1b. In addition to the Facility Administrator, the incident review team shall include upper-level facility management and the facility SART, with input from line supervisors, investigators, and medical or mental health practitioners. The review team shall:
- Q1b1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (115.86 (a))
- Q1b2. 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; and (115.86 (b))
- Q1b3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Q1c. All findings and recommendations for improvement will be documented on the 14-2F-DHS Sexual Abuse Incident Review Report. Completed 14-2F-DHS forms will be forwarded to the Facility Administrator, the facility PSA Compliance Manager, and the FSC PSA Coordinator. (115.86 (d)(6))
- Q1d. The facility shall implement the recommendations for improvement or shall document reasons for not doing so. The 14-2F-DHS Sexual Abuse Incident Review Report shall be forwarded to the FSC PSA Coordinator and the ICE Prevention of Sexual Assault (PSA) Coordinator through the local ICE Field Office. (115.86 (e))
- Q1e. Each facility shall conduct an annual review of the all sexual abuse investigations and resulting incident reviews to assess and improve sexual abuse intervention, prevention and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the Facility Administrator, FSC PSA Coordinator, and the ICE PSA Coordinator through the local ICE Field Office. (115.86 (c))
- Q2. Data Collection
- Q2a. All case records associated with claims of sexual abuse, including incident reports, investigative reports, detainee information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with CoreCivic Policy 1-15 Retention of Records. (115.87 (a)) (ACI-4-4281-8; 4-ALDF-4D-22-8)
- Q2b. The Facility Administrator shall maintain files, chronologically and in a secure location, regarding incidents of sexual abuse and assault, which include the following minimum information:
- Q2b1. The victim(s) and assailant(s) of a sexual assault;
- Q2b2. The date, time, location, and nature of the incident;
- Q2b3. The demographic background of the victim and the perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming);
- Q2b4. Detailed reporting timeline, including the names of the individual who reported the incident and received the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command;
- Q2b5. Any injuries sustained by the victim;
- Q2b6. All formal and/or informal action taken, including all post-report follow-up response taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.);
- Q2b7. All reports;
- Q2b8. Medical forms or other relevant medical information;
- Q2b9. Supporting memos and videotapes, if any;
- Q2b10. Any sanctions imposed on the perpetrator; and
- Q2b11. Any other evidentiary materials pertaining to the allegation.
- Q2c. The Facility Administrator shall maintain a listing of the names of sexual abuse victims and assailants, along with the dates and locations of all sexual abuse and assault incidents occurring within the facility. This list shall be maintained in the IRD as required by CoreCivic Policy 5-1 Incident Reporting. Such information shall be maintained on a need-to-know basis; access shall be limited to those staff involved in the treatment of the victim or the investigation of the incident. At no time may law enforcement sensitive documents or evidence be stored at the facility.
- Q2d. On an ongoing basis, the facility PSA Compliance Manager and Facility Administrator will work with the ICE Field Office and ICE PSA Coordinator to share data regarding sexual abuse incidents and response.

- Q2e. On an annual basis, CoreCivic shall aggregate the incident-based sexual abuse data. Include the number of reported sexual abuse allegations determined to be Substantiated, Unsubstantiated, or Unfounded, or for which investigation is ongoing and, for each incident found to be Substantiated, the following information: (115.87 (d))
 - The date, time, location, and nature of the incident;
 - The demographic background of the victim and perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex or gender nonconforming);
 - The reporting timeline for the incident (including the name of the individual who reported the incident and the date and time the report was received);
 - Any injuries sustained by the victim;
 - Post-report follow-up responses and action taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.); and
 - Any sanctions imposed on the perpetrator. (115.87 (d))
- Q2f. The CoreCivic FSC PSA Coordinator shall review all aggregated sexual abuse data in order to assess and improve the effectiveness of the CoreCivic sexual abuse prevention, detection, and response policies, practices, and training, to include identifying problem areas and taking corrective action on an ongoing basis. (115.88 (a) (1) (2)).
- Q2g. CoreCivic shall prepare an annual report of findings and corrective actions for each facility, as well as CoreCivic as a whole. The report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of CoreCivic's progress in addressing sexual abuse. (115.88 (a) (3) (115.88 (b))
- Q2h. The CoreCivic Annual PREA Report shall be approved by the company Chief Corrections Officer (115.88 (c)).
- Q2i. The Annual PREA Report containing all aggregated sexual abuse data shall be made available to the public at least annually through the CoreCivic website. Before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers. 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, however, the nature of the material redacted must be indicated. (115.88 (c) (115.89 (b) (115.89 (c))
- Q2j. Upon request, CoreCivic will provide all data described in this section from the previous calendar year to the Office for Civil Rights and Civil Liberties no later than June 30, (115. 87 (e)) or an alternative date provided and approved by ICE.
- Q2k. Data collected for this purpose shall be securely stored and retained in accordance with CoreCivic Policy 1-15 Retention of Records. (115.89 (a))
- Q2I. Any requests for information from an outside agency or entity (excluding the contracting governmental agency) regarding incidents of sexual abuse shall be forwarded to and reviewed by the FSC General Counsel or designee and the FSC Senior Director, PREA Programs and Compliance, prior to sending the response to the requesting entity.
- Q3. Audits
- Q3a. The FSC Quality Assurance Department shall conduct an annual audit of all CoreCivic facilities to ensure compliance with CoreCivic policy, the PREA National Standards, federal law and related standards.
- Q3b. During the three (3) year period starting on July 6, 2015, and during each three (3) year period thereafter, DHS shall ensure that each immigration detention facility is audited at least once.
- Q3c. The facility shall cooperate with all DHS audits of the facility's compliance with sexual abuse and assault policies and standards by:
- Q3c1. Making available relevant documents, records, and other information as requested (including available videotapes and other electronically available data) in advance of and during the onsite audit;
- Q3c2. Permitting auditors access to all areas of the facility;
- Q3c3. Permitting detainees to have private interviews with auditors, and to send confidential correspondence to the auditor; and
- Q3c4. Making available space suitable for interviews of detainees and staff.

REVIEW:

This policy will be reviewed annually by the Senior Director, PREA Compliance and Programs, and the Vice President, Operations Administration, or qualified designee.

This policy is subject to the review and approval of Immigration and Customs Enforcement (ICE).

APPLICABILITY:

CoreCivic ICE-Contracted Safety Facilities

APPENDICES:

14-2AA Preventing Sexual Abuse and Misconduct (English)
14-2AA Preventing Sexual Abuse and Misconduct (Spanish)

5-1CC-DHS PREA 5-1 IRD Incident Reporting Definitions

ICE Office of the Inspector General Hotline Poster

ATTACHMENTS:

14-2A-DHS CoreCivic PREA Training and/or Policy Acknowledgment

14-2B-DHS Sexual Abuse Screening Tool14-2C Sexual Abuse Incident Check Sheet

14-2D PREA Retaliation Monitoring Report (30-60-90)

 14-2E
 Inmate Allegation Status Notification

 14-2F-DHS
 Sexual Abuse Incident Review Report

 14-2H-DHS
 Self-Declaration of Sexual Abuse-Harassment

 14-2I-DHS
 Annual PREA Staffing Plan Assessment

3-20-2B PREA Questionnaire for Prior Institutional Employers

5-1B <u>Notice to Administration (NTA)</u>

5-1E Prison Rape Elimination Act (PREA) Reporting

7-1B PREA Physical Plant Considerations

REFERENCES:

CoreCivic Policy 1-15 Retention of Records

CoreCivic Policy 4-2 Maintenance of Training Records

CoreCivic Policy 5-1 Incident Reporting

CoreCivic Policy 9-18 Transportation and Offsite Post Operations

Prison Rape Elimination Act (PREA) of 2003

PREA National Standards - Title 6 of the Code of Federal Regulations, Part 115

Department of Homeland Security (DHS) Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities (Federal Register 79, 13100, March 7, 2014)

ICE 2011 Performance-Based National Detention Standard (PBNDS) 2.11 Sexual Abuse and Assault Prevention and Intervention, Revised December 2016

Bureau of Justice Statistics (BJS) Survey of Sexual Violence (SSV)

American Correctional Association (ACA) Standards, Adult Correctional Institutions (ACI) and Adult Local Detention Facilities (ALDF):

ACI 4-4084 and 4084-1

ACI 4-4277

ACI 4-4281-1 through 8

ACI 4-4406M

4-ALDF-2A-29

4-ALDF-4D-22-1 through 8

4-ALDF-6B-02

4-ALDF-7B-08

4-ALDF-7B-10 and 10-1

Proprietary Information - Not for Distribution - Copyrighted - Property of CoreCivic