

PREA Facility Audit Report: Final

Name of Facility: Saguaro Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 03/12/2024

Date Final Report Submitted: 06/26/2024

| Auditor Certification | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input type="checkbox"/> |
| Auditor Full Name as Signed: Bryan Pearson | Date of Signature: 06/26/2024 |

| AUDITOR INFORMATION | |
|-------------------------------------|---------------------------|
| Auditor name: | Pearson, Bryan |
| Email: | bryan@pearsongroupllc.com |
| Start Date of On-Site Audit: | 01/23/2024 |
| End Date of On-Site Audit: | 01/25/2024 |

| FACILITY INFORMATION | |
|-----------------------------------|---------------------------------------------|
| Facility name: | Saguaro Correctional Center |
| Facility physical address: | 1250 East Arica Road, Eloy, Arizona - 85131 |
| Facility mailing address: | |

| Primary Contact |
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|--------------------------|------------------------------|
| Name: | Jody Bradley |
| Email Address: | jody.bradleyjr@corecivic.com |
| Telephone Number: | (520) 464-0502 |

| Warden/Jail Administrator/Sheriff/Director | |
|---------------------------------------------------|--------------------------|
| Name: | Shawn Wead |
| Email Address: | shawn.wead@corecivic.com |
| Telephone Number: | (520) 464-0501 |

| Facility PREA Compliance Manager | |
|-----------------------------------------|------------------------------|
| Name: | Jody Bradley |
| Email Address: | jody.bradleyjr@corecivic.com |
| Telephone Number: | O: 520-464-0500 |
| Name: | Stacey Zazueta |
| Email Address: | stacey.zazueta@corecivic.com |
| Telephone Number: | O: 520-464-0576 |
| Name: | Tonee Meiner |
| Email Address: | tonee.meiner@corecivic.com |
| Telephone Number: | O: 520-464-0511 |

| Facility Health Service Administrator On-site | |
|------------------------------------------------------|-------------------------------|
| Name: | Crystal Shanley |
| Email Address: | crystal.shanley@corecivic.com |
| Telephone Number: | 520-464-0540 |

| Facility Characteristics |
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| Designed facility capacity: | 1926 |
| Current population of facility: | 1592 |
| Average daily population for the past 12 months: | 1393 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |
| Age range of population: | 19-82 |
| Facility security levels/inmate custody levels: | Low/Med/High |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 355 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 30 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 39 |

AGENCY INFORMATION

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|--------------------------------------------------------------|------------------------------------------------------------|
| Name of agency: | CoreCivic, Inc. |
| Governing authority or parent agency (if applicable): | |
| Physical Address: | 5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027 |
| Mailing Address: | |
| Telephone number: | 615-263-3000 |

Agency Chief Executive Officer Information:

| | |
|--------------------------|-------------------|
| Name: | Damon T. Hininger |
| Email Address: | |
| Telephone Number: | 615-263-3000 |

| Agency-Wide PREA Coordinator Information | | | |
|-------------------------------------------------|---------------|-----------------------|-----------------------------|
| Name: | Heather Baltz | Email Address: | heather.baltz@corecivic.com |

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

| Number of standards exceeded: | |
|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 2 | <ul style="list-style-type: none"> • 115.67 - Agency protection against retaliation • 115.73 - Reporting to inmates |
| Number of standards met: | |
| 43 | |
| Number of standards not met: | |
| 0 | |

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

| | |
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| 1. Start date of the onsite portion of the audit: | 2024-01-23 |
| 2. End date of the onsite portion of the audit: | 2024-01-25 |

Outreach

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| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated: | Just Detention international was contacted to inquire about correspondence received from inmates at SCC. A response was received stating there had been no inmate correspondence from Saguaro Correctional Center. A call was made to the Southern Arizona Coalition Against Sexual Assault to verify the services they can provide. SACASA can provide victim advocate services to inmate victims at a forensic exam or at SCC. |

AUDITED FACILITY INFORMATION

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| 14. Designated facility capacity: | 1926 |
| 15. Average daily population for the past 12 months: | 1393 |
| 16. Number of inmate/resident/detainee housing units: | 6 |

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| <p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p> |
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Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

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

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| <p>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p> | <p>1590</p> |
| <p>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</p> | <p>0</p> |
| <p>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</p> | <p>2</p> |
| <p>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</p> | <p>0</p> |
| <p>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</p> | <p>0</p> |

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| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: | 6 |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit: | 42 |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit: | 7 |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit: | 3 |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit: | 4 |
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit: | 0 |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | No text provided. |

| Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit | |
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| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit: | 320 |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 39 |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 30 |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | The facility was not tracking inmates that reported being a prior victim of sexual abuse on the risk assessment prior to the audit. Four were identified from recent assessments. A document showing all inmates that scored victim on the risk assessment was provided, however it did not identify inmates that reported being a prior victim of sexual abuse. |
| INTERVIEWS | |
| Inmate/Resident/Detainee Interviews | |
| Random Inmate/Resident/Detainee Interviews | |
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | 19 |

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| <p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p> | <p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p> |
| <p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p> | <p>The inmate population at Saguaro Correctional Center is made of inmates from three different states, Hawaii, Idaho and Montana. Inmates were selected based on housing assignment and state population to ensure inmates from each state and housing unit were represented.</p> |
| <p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p> | <p>Twenty inmates were selected at random. One became a targeted interview based on unknown information prior to the interview. This changed the number of random interviews to nineteen.</p> |
| <p>Targeted Inmate/Resident/Detainee Interviews</p> | |
| <p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p> | <p>21</p> |

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

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| <p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>None of the inmates interviewed reported having a physical disability.</p> |
| <p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>1</p> |

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| <p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>1</p> |
| <p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>None of the inmates interviewed reported being deaf or hard of hearing.</p> |
| <p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>3</p> |
| <p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>5</p> |

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| <p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>4</p> |
| <p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p> | <p>2</p> |
| <p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p> | <p>5</p> |
| <p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>None of the inmates interviewed in the segregation unit said they were placed in segregation involuntarily for reporting sexual abuse.</p> |

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| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews): | No text provided. |
| Staff, Volunteer, and Contractor Interviews | |
| Random Staff Interviews | |
| 71. Enter the total number of RANDOM STAFF who were interviewed: | 12 |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) | <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | No text provided. |
| Specialized Staff, Volunteers, and Contractor Interviews | |
| Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements. | |
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 18 |

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| 76. Were you able to interview the Agency Head? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 78. Were you able to interview the PREA Coordinator? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 79. Were you able to interview the PREA Compliance Manager? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

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

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

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| | <input type="checkbox"/> Other |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of VOLUNTEERS who were interviewed: | 1 |
| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other |
| 82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of CONTRACTORS who were interviewed: | 1 |
| b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other |
| 83. Provide any additional comments regarding selecting or interviewing specialized staff. | No text provided. |

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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| 84. Did you have access to all areas of the facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Was the site review an active, inquiring process that included the following: | |
| 85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 88. Informal conversations with staff during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

During the tour of the facility, this auditor observed staff present in all areas of the facility that inmates had access to. Cameras were observed throughout the facility in inmate housing units, program, service, and work areas. The recreation pads were observed along with newly added cameras. The cameras assisted with monitoring of inmates in the pads. All housing units were visited, and bathroom areas reviewed for possible cross gender views. Intake did not occur during the onsite audit, therefore a PREA education orientation could not be observed. PREA reporting information posters were seen in every housing unit wing, dining facility, recreation building, commissary line area, medical waiting area, and education building. PREA reporting information was observed on an inmate's tablet. There were posters that were in Spanish as well as English. Posters with information about making a report to the Eloy PD were found in the housing units. All showers were found to have shower curtains that provided modesty screens that blocked viewing of inmate's genitals or buttocks without creating a blind spot. The shower in restricted housing units was a solid stainless steel door that blocked the view of an inmates genitals and buttocks during showers. Toilets were in cells facing away from the door. Inmates were required to close their door if using the toilet. Cross gender viewing of toilets would be incidental if a female officer was doing count or a security check briefly looking into the window. Housing units had separate pods/wings that have a door that must be opened for entry. The facility required female staff to make a verbal announcement each time they entered a pod/wing. Signs were observed at each pod/wing door that stated "opposite gender staff must announce upon entry." Female staff were observed making an announcement when they entered the wing. Southern Arizona Center Against Sexual Assault has an MOU with SCC to provide victim advocate services to inmates that have

been victims of sexual abuse through a hotline from the inmate phone or through writing to them at provided addresses. The phone number for SACASA was posted on every inmate phone in the housing units and also on the inmate tablets that are issued to every inmate.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

- Yes
 No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

| | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---------------------------------------------------------------------------|
| Inmate-on-inmate sexual abuse | 2 | 0 | 2 | 0 |
| Staff-on-inmate sexual abuse | 9 | 2 | 9 | 2 |
| Total | 11 | 2 | 11 | 2 |

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

| | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|-------------------------------------------|------------------------------------|------------------------------|------------------------------------|---------------------------------------------------------------------------|
| Inmate-on-inmate sexual harassment | 5 | 0 | 5 | 0 |
| Staff-on-inmate sexual harassment | 4 | 0 | 4 | 0 |
| Total | 9 | 0 | 9 | 0 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 1 | 1 | 0 |
| Staff-on-inmate sexual abuse | 0 | 2 | 6 | 1 |
| Total | 0 | 3 | 7 | 1 |

Sexual Harassment Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 0 | 0 | 4 | 1 |
| Staff-on-inmate sexual harassment | 0 | 2 | 2 | 0 |
| Total | 0 | 2 | 6 | 1 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled: | 11 |
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| <p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p> |
| <p>Inmate-on-inmate sexual abuse investigation files</p> | |
| <p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p> | <p>2</p> |
| <p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>Staff-on-inmate sexual abuse investigation files</p> | |
| <p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p> | <p>9</p> |
| <p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |

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| <p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |
| <p>Sexual Harassment Investigation Files Selected for Review</p> | |
| <p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>14</p> |
| <p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p> |
| <p>Inmate-on-inmate sexual harassment investigation files</p> | |
| <p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>6</p> |
| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |

| Staff-on-inmate sexual harassment investigation files | |
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| 111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 8 |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files. | Five additional investigation files were reviewed during the corrective action period. There were four Staff on Inmate sexual harassment with 3 unfounded and 1 unsubstantiated. One was an Inmate on Inmate sexual harassment that was unsubstantiated. |
| SUPPORT STAFF INFORMATION | |
| DOJ-certified PREA Auditors Support Staff | |
| 115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | <input type="radio"/> Yes <input checked="" type="radio"/> No |

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

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| Standards | |
| Auditor Overall Determination Definitions | |
| <ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) | |
| Auditor Discussion Instructions | |
| <p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p> | |

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) The Saguaro Correctional Center provided the CoreCivic policy 14-2 Sexual Abuse Prevention and Response, effective date December 12, 2023, as the policy that outlines how the facility will implement CoreCivic’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy provides a clear zero tolerance policy toward incidents of sexual abuse and sexual harassment against inmates by other inmates, staff, contractors, and volunteers. The policy provides definitions of sexual abuse or sexual harassment by an employee, contractor or civilian and sexual abuse or sexual harassment by an inmate. The definitions mirror the definitions provided in the PREA standards. The policy provide Saguaro staff direction for prevention, detection and response to sexual abuse and sexual harassment.</p> <p>Inmate Interviews – 40 inmates were interviewed during the onsite audit. Most inmates interviewed said they were provided with the facility’s zero tolerance policy toward sexual abuse and sexual harassment.</p> |

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| | <p>Random Staff Interviews - 12 staff were selected at random from shift rosters and interviewed during the onsite audit. All staff said they were provided with the facility's zero tolerance definition during annual training and could provide a description of the policy.</p> <p>b) The CoreCivic policy 14.2 requires a Senior Director of PREA Compliance to be the PREA Coordinator for the agency. This position is an upper-level management employee responsible for "the development, implementation, and oversight of CoreCivic's efforts to comply with PREA Standards and the agency Sexual Abuse Response and Prevention Program."</p> <p>PREA Coordinator Interview - The PREA Coordinator stated during his interview that he has sufficient time and authority to manage the agency's efforts to comply with the PREA standards in all of CoreCivic's facilities. He reports directly to the Vice President of Core Services.</p> <p>Organizational Chart Review - The CoreCivic organizational chart was provided for review in the OAS. It shows the Senior Director of the PREA Programs & Compliance division reporting directly to the Vice President of Core Services.</p> <p>c) The Saguaro Correctional Center provided an organizational chart for review that has a Assistant Warden of Operations designated as the PREA Compliance Manager. The Assistant Warden reports Directly to the Warden. A letter from the Warden to all SCC staff designated the Assistant Warden as the PREA Compliance Manager.</p> <p>PCM Interview - The Assistant Warden was interviewed as the PREA Compliance Manager at the onsite audit. He stated he has the time and authority to manage PREA compliance duties at the facility. He has assistance from the Quality Assurance Manager and Quality Assurance Coordinator as well.</p> <p>Based on the information obtained from the review of policy, interviews with the PREA Coordinator and PREA Compliance Manager, CoreCivic and Saguaro CC organizational charts, the facility meets this standard.</p> |
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| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Warden Interview - During his interview, the Warden stated that Saguaro Correctional Center does not contract with other entities for the confinement of its inmates. However, CoreCivic has been contracted by the Hawaii Department of Correction, Idaho Department of Corrections and the Montana Department of Corrections to house their inmates in Saguaro Correctional Center.</p> |

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| | <p>Document Review - These contracts were provided for review and require CoreCivic to be PREA compliant.</p> <p>Based on the Warden's interview and documents provided, this standard is not applicable to Saguaro Correctional Center.</p> |
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| 115.13 | Supervision and monitoring |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a, c) Policy Review - The SCC CoreCivic policy 14-02, Sexual abuse prevention response requires an annual review of the staffing plan. The review is based on the 11 factors required by the standard. The prior compliance manager is required to complete A14-2I annual PREA staffing plan assessment form and forward it to the Warden for review. Following approval by the warden the 14-2I form is forwarded to the pre a coordinator for review. The policy requires the PREA Coordinator to assess and determine if any adjustments are needed to the staffing plan the facilities deployment of video monitoring systems and the resources the facility has to comply with the PREA standards. It was reported on the pre-audit questionnaire that the staffing plan is based on a 1720 inmate population and the facility had a daily average of 1478 inmates since the last audit.</p> <p>Document Review - The form 14-2I PREA Staffing Plan Assessment for 2023, 2022 and 2021 were provided for review. The form provides the eleven factors in the standard in the Staffing Plan Review Checklist section. The review was conducted by the PREA Compliance Manager, reviewed by the Warden and the PREA Coordinator.</p> <p>Interviews - The PREA Compliance Manager stated the staffing levels and vacancies are reviewed on a weekly basis in addition to the required annual staffing plan review. The review is documented on a CoreCivic form 14-2I and forwarded to the Warden for review and signature. The Warden said the staffing plan is reviewed regularly with HR and annually. The staffing plan focuses on mandatory posts for proper supervision of the inmate population in all areas of the facility. The frequency and type of PREA incidence are taken into consideration to determine if there is a need for a change in or addition to staff coverage of an area.</p> <p>Tour Observations - during the tour, this auditor observed staff present in all areas of the facility that inmates had access to. Cameras were observed throughout the facility in inmate living, program, service, and work areas.</p> <p>b) Policy Review - SCC CoreCivic policy 14-2 requires the Chief of Security to review the shift roster for deviations from the staffing plan and notify the PREA Compliance Manager of the deviations.</p> <p>A memorandum from the Warden to this auditor states there were no deviations to</p> |

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| | <p>the staffing plan during the review period.</p> <p>Warden Interview - The Warden described a deviation from the staffing plan as the closure of a mandatory post. Discretionary posts are in addition to the staffing plan. If a mandatory post is not filled with overtime, the ADO is notified as well as the Warden. The Warden reviews the shift report daily.</p> <p>d) Policy Review - SCC CoreCivic policy 14-2 requires intermediate and upper level supervisors to conduct unannounced facility rounds to identify and deter staff sexual abuse or sexual harassment. Unannounced rounds are to be documented in the applicable logs. Rounds are to be conducted on both day and night shifts. Employees are prohibited by this policy from alerting other staff of the unannounced rounds. The policy reflects the requirement of the standard.</p> <p>Document Review - The facility provided on the PAQ shift reports with unannounced rounds documented for four different dates. This auditor requested shift reports for the 23rd day of four different months for all shifts for review. Unannounced rounds by shift supervisors were documented on all shifts for each date.</p> <p>Staff Interview - A custody shift supervisor was interviewed regarding unannounced rounds. He stated he completes unannounced rounds at different times each day and visits a different unit each time. If staff were found to be alerting other staff of the unannounced rounds, they would be subject to discipline.</p> <p>Based on the policy and documents reviewed, tour observations, and interviews, the facility meets the standard.</p> |
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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The Saguaro Correctional Center provided a report from their offender information system that showed there were no inmates under the age of 18 in the facility at the time of the audit. A memorandum from the warden was provided that stated, there were no inmates under the age of 18 in the facility. None of the inmates interviewed were found to be under the age of 18.</p> <p>Based on the documentation provided and observations, The facility meets the standard.</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |

Auditor Discussion

a) Policy Review - SCC CoreCivic policy 14-2 requires exigent circumstances for cross gender strip searches and cross gender visual body cavity searches. Body cavity searches are to only be performed by a designated qualified medical professional. The policy reflects this provision of the standard.

Tour Observation - Strip searches are conducted in cells in the R & D building. Female staff would not be able to observe the strip searches.

PAQ - The facility reported zero cross gender strip searches and zero cross gender visual body cavity searches in the past 12 months.

c) Policy Review - SCC CoreCivic policy 14-2 requires all cross gender strip searches and cross gender visual body cavity searches to be documented in a log and on a form 5-1B Notice to Administration with details of the exigent circumstance provided. The policy reflects the requirements of this provision of the standard.

d) Policy Review - SCC CoreCivic policy 14-2 requires the facility to allow inmates to shower or use toilets without opposite gender staff viewing their genitalia or buttocks, unless the viewing is incidental to security checks. Opposite gender staff are required to make an announcement prior to entering housing units or pods/wings. The policy reflects the requirements of this provision of the standard.

Tour Observations - During the tour of the facility, all housing units were visited, and bathroom areas reviewed for possible cross gender views. All showers were found to have shower curtains that provided modesty screens that blocked viewing of inmate's genitals or buttocks without creating a blind spot. The shower in restricted housing units was a solid stainless steel door that blocked the view of an inmates genitals and buttocks during showers. Toilets were in cells facing away from the door. Inmates were required to close their door if using the toilet. Cross gender viewing of toilets would be incidental if a female officer was doing count or a security check briefly looking into the window. Housing units had separate pods/wings that have a door that must be opened for entry. The facility required female staff to make a verbal announcement each time they entered a pod/wing. Signs were observed at each pod/wing door that stated "opposite gender staff must announce upon entry." Female staff were observed making an announcement when they entered the wing.

Inmate Interviews - All inmates reported having enough privacy to use the use the showers without being seen by female staff. Some inmates said that female staff could see them using the toilet if they looked in the window during security checks. Some stated they could stand with their back to the door while using the toilet if they know female staff were on the wing. Most inmates said they could hear female staff make an announcement as required.

Staff Interviews - During random staff interviews, all staff said they were aware female staff were required to make an announcement prior to entering a wing/pod. Female staff said they make an announcement every time they enter a wing/pod. Male staff said they observe female staff making the announcements.

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| | <p>e) Policy Review - SCC CoreCivic policy 14-2 prohibits staff from strip searching a transgender inmate for the sole purpose of determining their genital status. The policy reflects the requirements of this provision of the standard.</p> <p>Staff Interviews - During random staff interviews, all staff stated they were not allowed to strip search a transgender inmate only to determine their genital status. The strip search would have to be for security concerns or a search for contraband.</p> <p>Transgender Inmate Interview - Three transgender inmates were interviewed. None felt like strip searches have been done to determine their genital status.</p> <p>f) Document Review - The facility provided search training curriculum for review. Transgender and cross gender searches are covered on page 10-11 under Physical Body Searches. The training informs staff to search transgender inmates based on their gender identity and their preferred gender of staff to search them. Staff are prohibited from doing "dual gender" pat searches and strip searches to determine a transgender inmates genital status.</p> <p>Staff Interviews - During random staff interviews, all staff required to complete search training said they received training on how to conduct cross gender searches and transgender inmate searches. All stated transgender inmates can choose the gender of the staff searching them and staff are prohibited from searching a transgender inmates to determine genital status.</p> <p>Based on policy and document review, interviews and tour observations, the facility meets all provisions of this standard.</p> |
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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic policy 14-2 requires staff to provide interpretive services for inmates that are LEP and accommodations for inmates with disabilities to ensure they can benefit from access to the PREA reporting and prevention system. The facility provided photos of a TTY Phone and Purple VRS to assist deaf inmates. A memorandum from the Warden states the PREA video has subtitles for deaf inmates as well. Staff provide the assessments and PREA education information verbally to assist inmates that are blind or cannot read. CoreCivic has a contract with Language Line to provide interpretive services in several languages and sign language.</p> <p>Inmates were interviewed that were designated as LEP or as having cognitive disabilities by the facility. The LEP inmates were asked if they needed an interpreter and declined as they said they could understand and speak English well enough to communicate effectively. All were in the English language program at the facility.</p> |

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| | <p>The inmates with cognitive disabilities were able to understand the questions in the interview and knew how to make a report of sexual abuse. All inmates said the facility staff went over the PREA education information with them individually to ensure they understood the information.</p> <p>b) LEP inmates can be provided an interpreter via telephone to enable communication with staff to make a report of sexual abuse, to receive PREA education information and to complete an assessment interview. The facility also had staff that were designated as interpreters for Spanish. The facility provided a contract with the Language Line and information on how to access the language line that is utilized by the shift supervisors. PREA reporting posters were seen on the tour in Spanish posted throughout the housing units, program areas and recreation areas. A Spanish translation of the PREA brochure is made available at the PREA education. The use of a staff interpreter was documented on 6 risk assessments that were provided for review.</p> <p>c) SCC CoreCivic policy prohibits the use of inmate interpreters except in limited circumstances. During random staff interviews, staff stated they would not be allowed to use an inmate interpreter per policy and because it would violate confidentiality.</p> <p>Based on the policy and documents reviewed, interviews and observations during the facility tour, the facility meets the provisions of this standard.</p> |
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| 115.17 | Hiring and promotion decisions |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Policy Review - CoreCivic SCC policy 14-02 states the agency will decline to hire or promote any individual or decline to utilize a contract staff that would have contact with inmates if they have engaged in, been convicted of or civilly adjudicated for sexual abuse in a correctional institution or in the community.</p> <p>Document Review - Fourteen staff hired in the last 12 months were randomly selected for file review. All Fourteen had a criminal background check and were asked the required questions about prior sexual abuse at the time of hire. None had a record of sexual abuse adjudications or provided a positive response to sexual abuse on the self-declaration forms completed at the time of hire.</p> <p>b) CoreCivic SCC policy 14-02 states “Any incident of sexual harassment shall be considered in determining whether to hire or promote any individual, or to enlist the services of any contractor, who may have contact with inmates/detainees.”</p> <p>HR Interview - The Human Resources manager was asked if incidents of sexual harassment were considered in deciding to hire or promote staff or allow contract</p> |

staff to provide services at the facility. She said all staff new hires or promotions are asked on the self-declaration form if a substantiated allegation of sexual harassment has been made against them.

c) CoreCivic SCC policy 14-02 requires a criminal background check for all new hire staff that may have contact with inmates and contact prior institutional employers for information on substantiated sexual abuse incidents or resignation during a sexual abuse investigation.

Document Review - Fourteen staff hired in the last 12 months were randomly selected for file review. All Fourteen had a criminal background check.

Interview - The HR Manager said all new hire staff have a criminal background check completed prior to hire and if they have prior corrections employment, she contacts the former corrections employer to ask if the applicant had any substantiated sexual abuse allegations or if they resigned during the investigation. She emails the former employer to document the request in case they do not respond.

d) CoreCivic SCC policy 14-02 states "Before hiring new employees or enlisting the service of any contractor who may have contact with inmates/detainees, CoreCivic shall ensure that a criminal history record check has been conducted."

Interview - The HR Manager said a criminal background check is completed on all contract staff prior to them providing services at the facility.

Document Review - Ten contract staff files were randomly selected for review. All ten had a criminal background check completed prior to providing services at the facility.

e) CoreCivic SCC policy 14-02 states "CoreCivic shall ensure that criminal history record checks are conducted at least every five years for current employees and contractors who may have contact with inmates/detainees, or, have in place a system for otherwise capturing such information."

Interview - The HR Manager monitors and ensures criminal background checks on current staff on their birth month every 5 years. She also audits the process two times per year to ensure no background checks are missed.

Document Review - Nineteen current staff files were randomly selected for review. All nineteen had a criminal background check that was less than 5 years old on file.

f) CoreCivic SCC policy 14-02 states "The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form shall be completed by current employees and contractors on an annual basis to serve as verification of the fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as described in this policy. The annual signature shall be in lieu of having the form completed as part of an annual review process."

Interview - The HR Manager said the self-declaration is signed during PREA training each year. The self-declaration includes an affirmative duty to disclose the misconduct from the questions on the form. The employee evaluation process does

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| | <p>not require staff to provide a self evaluation as part of the process.</p> <p>g) CoreCivic SCC policy 14-02 states “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.”</p> <p>h) CoreCivic SCC policy 14-02 states “Unless prohibited by law, CoreCivic shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such former employee has applied to work.”</p> <p>Interview - The HR Manager said if an institutional employer contact her for a PREA employment background check, she will contact the facility investigator to review for any investigations. When former employees are rehired, she contacts the facility investigator to check for prior sexual abuse investigations and documents the check.</p> <p>Based on the HR Manager interview, policy and documents reviewed, the facility meets the provisions of this standard.</p> |
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| 115.18 | Upgrades to facilities and technologies |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Policy Review - SCC CoreCivic policy 14-2 requires all modifications, expansions, acquisitions, or renovations to consider the effect on keeping inmates safe from sexual abuse. The policy reflects this provision of the standard.</p> <p>Interview PCM - The PCM said new recreation pads were added outside of the restricted housing unit. Inmates could be easily monitored through the fencing for each recreation pad. This was the only modification during the review period. The PCM said prevention of sexual abuse would be considered for any modification.</p> <p>Warden Interview - The Warden said the PCM is involved in the planning for any modification, addition or renovation to ensure prevention of sexual abuse is considered.</p> <p>b) SCC CoreCivic policy 14-2 requires video monitoring updates, expansions or installations will be completed with consideration for keeping inmates safe from sexual abuse. The policy reflects this provision of the standard.</p> <p>PAQ - SCC reported two cameras being added to the new RHU recreation pads.</p> <p>Tour Observation - The recreation pads were observed along with the added cameras. The cameras assisted with monitoring of inmates in the pads.</p> <p>The facility meets this standard based on interviews and tour observations.</p> |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | <p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1465 622">a) SCC CoreCivic policy 14-2 and 13-79 Sexual Assault Response requires a forensic medical examination to be offered to an inmate victim of sexual abuse when medically appropriate. The PREA Compliance Manager, Facility Investigator or ADO are required to consult with the Eloy Police Department prior to transporting the inmate victim to a Honor Health or Banner Health hospital for an examination. The facility provided an MOU with the Eloy Police Department that requires the facility to obtain guidance from the Eloy PD for arranging a forensic examination.</p> <p data-bbox="256 665 1465 1070">b) SCC CoreCivic policy 13-79 requires the Eloy PD to follow a uniform evidence protocol that is based on shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011. A review of the national protocol found the minimum recommended time frame for collecting forensic evidence was 72 hours. The policy states the time frame for evidence collection is within 72 hours of the assault, which follows the national protocol, with the decision to collect evidence beyond 72 hours being decided by law enforcement.</p> <p data-bbox="256 1180 1477 1462">c) SCC CoreCivic policy 13-79 states “Treatment services shall be provided to all victims of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.” CoreCivic provided an MOU with Honor Health to provide medical and forensic examination services to inmates. The MOU was signed April 11, 2018 and will continue until terminated by either party with a 30 day notice. SCC can also utilize Banner Health hospital in Scottsdale, Arizona.</p> <p data-bbox="256 1505 1469 1704">d-e) SCC has a memorandum of understanding with Southern Arizona Center Against Sexual Assault to provide inmate victims of sexual abuse victim advocate services at the time of a forensic examination. This MOU was signed in March 25, 2021 for a period of three years. No forensic exams were reported on the PAQ during the review period.</p> <p data-bbox="256 1747 1461 1989">f) SCC CoreCivic has an MOU with Eloy Police Department to provide criminal investigations of sexual abuse of inmates at Saguaro CC. The MOU requires the Eloy PD to conduct criminal investigations in accordance with DOJ standard 115.21 (a) through (e). During his interview, the PREA Compliance Manager said the facility investigator is required to contact the Eloy PD if a report of sexual abuse is determined to be a possible criminal offense.</p> <p data-bbox="256 2031 1406 2101">Based on the policies and documents reviewed, interviews, the facility meets the standard.</p> |

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a-b) SCC CoreCivic policy 14-2 states “The Warden/Facility Administrator shall ensure that an administrative investigation and/or a referral for a criminal investigation, is completed for all allegations of sexual abuse and sexual harassment. All allegations of sexual abuse or sexual harassment shall be referred for investigation to an agency or entity with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior.”</p> <p>The CoreCivic investigation policy is posted on the CoreCivic website at https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea. Twenty investigations were provided for review. Two reports of sexual abuse were referred to the Eloy Police Department for criminal investigation.</p> <p>c-d) SCC CoreCivic policy 14-2 Sexual Abuse Prevention and the MOU between CoreCivic and the Eloy PD describes the responsibilities of both the facility and the police department. The Eloy PD agrees to follow 115.21 (a) through (e), have investigators trained on conducting sexual abuse investigation in a confinement setting, gather DNA evidence, and consult with prosecutors prior to conducting compelled interviews.</p> |

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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) SCC provided the CoreCivic PREA training curriculum for review. This auditor found the ten required topics covered in the curriculum. During random staff interviews, staff were asked if the training covered these topics. All staff could describe the information provided to them about each of the topics, verifying the training provided covered the material required in this standard.</p> <p>b) CoreCivic policy 14-2 states “All CoreCivic facility employees shall receive comprehensive training on preventing, detecting and responding to sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmates/ detainees at the facility.” The training reviewed is tailored to both male and female populations. All staff are required to complete the training prior to beginning work at Saguaro CC, even if they transfer from another CoreCivic facility. During random staff interview, all staff stated they had completed the training prior to beginning work at the facility.</p> <p>c-d) CoreCivic policy 14-2 requires staff to complete the PREA training annually. During Random staff interviews, all staff indicated they receive the training annually.</p> |

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| | <p>The training is completed on a computer based training with an electronic signature. A review of training documents for thirty-two staff found all had received the training annually.</p> <p>Based on the policies, documents reviewed and interviews, the facility meets this standard.</p> |
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| 115.32 | Volunteer and contractor training |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-02 states “All volunteers and contractors who have contact with inmates/detainees shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment prevention, detection, reporting, and response as outlined in this policy.”</p> <p>b) CoreCivic SCC policy 14-02 states “Contractors, including but not limited to, medical, mental health, education and foodservice shall receive the same PREA training required of all CoreCivic employees who have contact with inmates/ detainees.”</p> <p>c) CoreCivic SCC policy 14-02 states “The signed documentation confirming that each Volunteer or Contractor understands the training that he/she has received will be kept in the volunteer or contractor’s file by either the Learning Development Manager, facility Volunteer Coordinator or other staff designated by the Warden/ Facility Administrator or PREA Compliance Manager.”</p> <p>Volunteer Document Review - Training records were reviewed for three volunteers randomly selected from the volunteer list. All three had completed the volunteer PREA training that included information on the zero tolerance policy, definitions of sexual abuse and sexual harassment, a volunteers responsibilities if an inmate reports an incident of sexual abuse or sexual harassment to them. The training form is signed indicating they received and understood the training.</p> <p>Contractor Document Review - Training records for seven randomly selected contract staff were reviewed. All seven had completed the PREA training in the last year.</p> <p>The facility meets the provisions of the this standard based on the policy and documents reviewed.</p> |

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |

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| | <p>Auditor Discussion</p> <p>CoreCivic policy 14-2 states “Upon arrival at the facility for intake, each inmate/ detainee shall be provided with information regarding sexual abuse prevention and reporting. The facility shall provide resident education at intake in formats accessible to all residents, including those who are disabled or Limited English Proficient (LEP).” The policy also requires inmates to sign that they have received the information.</p> <p>Inmate Interviews - Forty inmates were interviewed. Most recalled receiving a brochure and inmate handbook about PREA reporting on the first day of arrival at the facility and additional information was provided in the next week. Inmates that had arrived at SCC more than 10 years ago couldn’t recall when they received the information, but remember getting information at some point after arrival. Most thought the information was on their tablet. Most remember signing a paper when they completed the class and received the pamphlet. All said they see the posters about PREA reporting everywhere in the facility.</p> <p>Intake Staff Interview - three staff that provide the PREA education to inmates said the PREA brochure and inmate handbook are provided to the inmates at arrival. A more comprehensive PREA education is provided a week or two after arrival. The education is done in a group on the first day. They are provided with the PREA video from the PREA Resource Center, victim advocate pamphlet and PREA pamphlet. The pamphlets are read to assist inmates that cannot read or that have visual impairment. Because inmates are coming from three far away states, they arrive in large groups and there are not many intake days. When the orientation is completed, the staff have the inmates sign a form indicating they received the information. Spanish pamphlets and handbooks are also available. If an inmate Limited English Proficient, the staff will utilize the language line to access an interpreter to assist with providing the information.</p> <p>Tour Observations - Intake did not occur during the onsite audit, therefore a PREA education orientation could not be observed. During the tour, PREA reporting information posters were seen in every housing unit wing, dining facility, recreation building, commissary line area, medical waiting area, and education building. PREA reporting information was observed on an inmate’s tablet. There were posters that were in Spanish as well as English.</p> <p>Document Review - Forty inmate records were reviewed for PREA education completion. All had signed a PREA Education Acknowledgement - Intake form within 30 days of their arrival.</p> <p>Based on the policies reviewed, documents reviewed and interviews, the facility meets all of the provisions of this standard.</p> |
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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |

Auditor Discussion

a) CoreCivic SCC policy 14-02 “In addition to the general training provided to all employees, and to the extent that CoreCivic conducts sexual abuse investigations, investigators shall receive training in conducting sexual abuse investigations in confinement settings. The PREA Compliance Manager shall ensure that more than one 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 (e.g. leave, paid time off, sickness, offsite training, etc.)”

Investigator Interview - The designated facility investigator was interviewed and said he has completed the NIC Investigating Sexual Abuse in a Confinement Setting in addition to training he attended with the Arizona Investigator’s Association.

b) CoreCivic SCC policy 14-02 “Specialized training for investigators shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.”

Document Review -The NIC Investigating Sexual Abuse in a Confinement Setting curriculum was reviewed and found to cover interview techniques, Miranda and Garrity warnings, evidence collection, and criteria and evidence required to substantiate an administrative case or a criminal case.

c) CoreCivic SCC policy 14-02 “Employees who conduct sexual abuse and sexual harassment administrative investigations are required to document completion of this training by signing the 14-2A1 PREA Training Acknowledgment Specialized Training. This documentation shall be maintained in the employee training file.”

Document Review - The training certificate for the facility Investigator from NIC was provided.

CORRECTIVE ACTION REQUIRED: Through the review of investigation files, it was discovered that another facility staff was conducting investigations in addition to the designated Facility Investigator. Documentation of his training was requested and could not be provided. This resulted in a corrective action where the staff must complete the required training or discontinue conducting investigations.

Corrective Action Completed: A training certificate for completion of the NIC Investigating Sexual Abuse in a Confinement Setting was provided after the onsite audit. This corrective action is now completed.

CORRECTIVE ACTION REQUIRED: During the review of investigation files, it was observed that staff designated as first responders were interviewing the alleged perpetrator and potential witnesses, thereby conducting an investigation. This resulted in a corrective action where the first responder staff would either have to complete the required specialized investigations training or stop questioning the perpetrator and witnesses. They would need to be limited to getting an initial

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| | <p>statement from the victim to determine what evidence may need protecting and how to keep the victim safe.</p> <p>Staff will be instructed by the Warden, or designee, only to gather information from the alleged victim about what happened to provide to investigators and to determine if evidence needs to be protected. Completed investigation files will be provided for review for 60 days to determine if the practice is compliant.</p> <p>Corrective Action Completed: The Chief of Security and Deputy Warden/PREA Compliance Manager held a Supervisor Meeting on March 27, 2024 attended by Investigators, Unit Managers and Shift Supervisors. Shift Supervisors were instructed to only take a brief statement from the inmate victim and document for it investigators. They cannot question the alleged inmate perpetrator, witnesses or staff in response to a report of sexual abuse the report. A staff that was conducting investigations completed the NIC specialized sexual abuse investigations training to be qualified to conduct PREA investigations.</p> |
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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) SCC CoreCivic policy 14-2 requires medical and mental health staff to complete a specialized medical training that covers the four topics required by this standard. The course curriculum is the NIC PREA 101 for Medical and Mental Health Practitioners that covers the four required topics in the standard. Three medical staff and a mental health staff were interviewed and asked about the specialized medical training they were required to complete. All could describe the four topics covered in the training. They found them to be very similar to information provided in the general PREA training they are required to complete annually as well.</p> <p>b) CoreCivic policy 14-2 states that medical staff do not conduct forensic examinations.</p> <p>c-d) Specialized medical training documents were reviewed for five medical staff, three contractors and two facility staff. All five had completed the NIC specialized medical training module and the PREA overview training that all staff must complete annually.</p> <p>Based on the interviews, policy and documents reviewed, the facility meets all provisions of this standard.</p> |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |

Auditor Discussion

- a) CoreCivic SCC policy 14-02 provides the requirements for the screening of inmates at intake to the facility for risk of being sexually abused and for being sexually abusive toward other inmates. The policy reflects this provision of the standard.
- b) CoreCivic SCC policy 14-02 states “Inmates/detainees shall be assessed, within 24 hours of arrival at the facility, unless contracting agency policy authorizes 72 hours following arrival.” The policy reflects this provision of the standard.

Screening Staff Interview - The staff that complete the initial risk screening of inmates at arrival to the facility said the screening is completed on the first day the offenders arrive or the next morning if they arrive late in the day.

Inmate Interviews - Most inmates could recall being asked the questions for the risk screening the first or second day after they arrived. Inmates that have been at SCC more than 10 yrs could not recall being asked these questions that long ago, but did remember being asked the questions recently.

Document Review - risk screenings were reviewed for forty inmates that arrived during the review period. All were completed within the required 72 hour time frame.

- c) CoreCivic SCC policy 14-02 states “Screenings will be completed and documented using an objective screening instrument. The CoreCivic 14-2B Sexual Abuse Screening Tool shall be utilized for this purpose unless the contracting agency requires usage of another form or computerized screening process.” The policy reflects this provision of the standard.

- d) The policy provides the criteria for assessing inmates for risk of sexual victimization. The assessment considers disabilities, age, physical build, prior incarceration, violence in priors, prior sex offense convictions, identification as LGBTI, prior victim of sexual abuse, perception of vulnerability, and civil immigration detainee. The policy reflects this provision of the standard.

Screening Staff Interview - The staff that conduct initial risk screenings was interviewed. She was asked what factors the risk screening considers for risk of victimization. The factors she described covered all ten required by the standard and the policy. Some of the information is gathered or verified from review of the inmate records and some is gathered from inmate responses to questions in an interview.

Document Review - The forty assessments reviewed had questions that covered all ten of the criteria in the standard. However, the sample was from assessments completed in 2023. A second sample of assessments was requested that were completed during 2024. These did not assess for prior conviction for sex offender as a risk of victimization due to a change in the assessment that was implemented in January of 2024. This revised assessment did not meet the standard.

CORRECTIVE ACTION REQUIRED: The assessment must be revised to include an

assessment of the inmate record for prior convictions for sex offenses. Assessments completed for both the initial and re-assessment using the revised screening instrument will be reviewed for a 60 day period after the risk assessments instrument is changed to determine if the corrective action meets the standard.

e) CoreCivic SCC policy 14-02 states “The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse.” The policy reflects this provision of the standard.

Screening Staff Interview - Staff that complete the initial screening said answers from the inmate interview and the inmate record are used to assess for prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. She reviews the criminal history and institutional conduct record in addition to asking the inmate questions about prior criminal history and conduct.

Document Review - Forty assessments were reviewed for inmates that arrived during 2023. The screening included six factors in the predatory history/risk section. Those were prior convictions for sexual abuse in a prison or jail, prior discipline for sexual abuse in a prison or jail, prior convictions for sex offenses or violent offenses against an adult or child, disciplinary sanctions for violence in a prison or jail, and security threat group affiliation. The screening for risk of being sexually abusive meets the standard in the 2023 and 2024 samples.

f) CoreCivic SCC policy 14-02 states “Within a set period of time not to exceed 30 days from the inmate's arrival at the facility, a re-assessment of the inmate/ detainee's risk level of victimization or abusiveness, will be completed utilizing the 14-2B Sexual Abuse Screening Tool, or contracting agency equivalent instrument. The 30-day reassessment will include any additional relevant information received by the facility since the initial intake screening. The facility will maintain a tracking system to ensure that reassessments are not completed beyond 30 days.” The policy reflects this provision of the standard.

Screening Staff Interview - Two staff that complete the risk screening re-assessment were interviewed. Both staff said they interview the inmate again to ask the same questions that are used for the intake screening. The inmates answers and the inmate record are used to complete the risk screening re-assessment prior to 30 days. They said the re-assessment is usually completed around 25 days after arrival.

Inmate Interview - Forty inmates were interviewed and asked if staff asked them questions about prior victimization, disabilities, identifying as GBTI, or if they felt vulnerable to sexual abuse at this facility a second time around 30 days after arrival. Most inmates said yes, they remembered being asked again a few weeks later or they thought they were asked again about a month after the first time.

Document Review - Forty risk screening re-assessments were reviewed for inmates that arrived in 2023. The review found all forty had been completed within 30 days of the inmate's arrival.

g) CoreCivic SCC policy 14-02 states "A reassessment shall also be completed when warranted, due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate/detainee's risk of victimization or abusiveness. Following an incident of sexual abuse, a reassessment shall be completed on both the alleged victim and alleged perpetrator." The policy reflects and meets this provision of the standard.

Screening Staff Interview - The staff that completes the initial screenings said she also completes re-assessments for the inmate victim and inmate perpetrator for sexual abuse incidents, unless they are unfounded. She would also do a re-assessment if new information is received that impacts the assessment.

Document Review - A review of the completed investigations found seven sexual abuse incidents that were not unfounded. A risk screening re-assessment was completed for the inmates involved in all seven of the incidents.

h) CoreCivic SCC policy 14-02 states the inmate cannot be disciplined for refusing to answer questions pertaining to disabilities, identification as LGBTI, prior victimization, or perception of vulnerability.

Inmate Interviews - Forty inmates were interviewed and asked if staff asked them questions about prior victimization, disabilities, identifying as GBTI, or if they felt vulnerable to sexual abuse at this facility when they arrived and a second time around 30 days after arrival. Most inmates said yes, they remembered being asked the first or second day and again a few weeks later or they thought they were asked again about a month after the first time. None said they were told they would be disciplined if they refused to answer the questions.

i) CoreCivic SCC policy 14-02 states "The facility shall control the dissemination within the facility of responses to questions on the screening forms in order to ensure that the sensitive is not exploited to the inmate/detainee's detriment by staff or other inmates/detainees."

PREA Coordinator Interview - the PREA Coordinator said the information on the risk assessments are confidential and limited to staff that complete them or who are authorized access. The assessments are in an electronic system that is password protected.

PCM Interview - The PCM said the risk assessment is in an electronic system with limited access. Only staff that complete the assessment or review assessments are authorized access.

Screening Staff Interview - The staff that complete risk assessments all said the information that is contained on a risk assessment is confidential and only authorized staff have access.

The facility does not meet this standard due to the risk assessment not assessing for prior conviction for a sex offense against a child or adult in the risk of victimization section of the assessment. A correction will be required.

CORRECTIVE ACTION REQUIRED: The assessment must be revised to include an assessment of the inmate record for prior convictions for sex offenses. Assessments completed for both the initial and 30 day re-assessment using the revised screening instrument will be reviewed for a 60 day period after the risk assessments instrument is changed to determine if the corrective action meets the standard.

Corrective Action Completed: The CoreCivic risk assessment was modified on March 12, 2024 adding prior conviction for sex offense against an adult or child. The CoreCivic PREA Coordinator sent the revised risk assessment for review and approval. SCC was asked for a list of the inmates that arrived since the new risk assessment was implemented to select a sample for review. Intake occurred on only two dates in two months. The facility provided a daily admit report to verify this. SCC receives infrequent arrivals due to the inmate population coming from three distant states. Forty intake assessments were reviewed and verified the use of the revised risk assessment. Thirty-nine arrived on a day in April and one arrived on a day six weeks later in May. All assessments were completed the day after arrival in less than 72 hours. Thirty-nine 30-day re-assessments were provided for review. All thirty-nine were completed using the revised assessment and within 30 days of arrival. The inmate that arrived in May was not at the facility for 30 days and did not have a re-assessment completed. A reassessment for new information using the revised risk assessment was also completed for one inmate during the corrective action period and provided for review.

Based on the review of the revised risk assessment and use for new arrivals for the 90 days following the interim report, the facility has completed the corrective action and now meets the standard.

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| 115.42 Use of screening information | |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-02 states “The facility shall use the information from the 14-2B Sexual Abuse Screening Tool, or equivalent contracting agency form, completed at initial screening and at all subsequent reassessments, in the consideration of housing recreation, work program and other activities.” The policy reflects this provision of the standard.</p> <p>PCM Interview – The PCM said the risk assessment results are utilized as a factor in inmate housing assignments. Alerts are generated for inmates at risk of being a victim or an abuser. An inmate that is at risk of being a victim cannot be housed with an inmate that is a risk to be an abuser/perpetrator. He reviews the housing rosters for proper assignments based on the alerts.</p> <p>Risk Screening Staff Interview – The staff that complete the risk assessments said the results can be either a risk for victimization, risk for abuser/perpetrator or no risk.</p> |

The results create alerts in the inmate information system. The risk assessment alerts are reviewed when making housing assignments.

Document review - a copy of the housing roster with alerts was provided for review. The roster had designations for inmates at risk for victimization and at risk for perpetration or no risk.

b) CoreCivic SCC policy 14-02 states The facility shall make individualized case by case determinations about how to ensure the safety of each inmate/detainee." The policy reflects this provision of the standard.

Risk Screening Staff Interview - The staff that complete the risk assessments said the results can be either a risk for victimization, risk for abuser/perpetrator or no risk. The results create alerts in the inmate information system. The risk assessment alerts are reviewed when making housing assignments.

c) CoreCivic SCC policy 14-02 states "The decision whether to assign a transgender or intersex inmate/detainee to a male facility or a female facility will generally be made by the contracting agency prior to the inmate/detainee's arrival at a CoreCivic facility. The Warden/Facility Administrator shall consult with his/her appropriate contracting agency representative, CoreCivic Managing Director, and the CoreCivic FSC PREA Coordinator in the event there are concerns with a placement." "In deciding whether to house a transgender/intersex inmate/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 inmates/detainees, the facility shall consider whether the placement would ensure the inmate/detainee's health and safety and whether the placement would present management or security problems." The policy reflects this provision of the standard.

Core Civic policy 14-09 Management of Transgender and Intersex Inmates states "Following identification of a Transgender or Intersex inmate/detainee at Intake (or upon identification after Intake), the inmate/detainee shall be referred to the SART established by the facility for an assessment using the CoreCivic 14-9A Transgender/ Intersex Assessment and Treatment Plan form. Referral shall be within 24 hours following the inmate/detainee's arrival (excluding weekends and holidays)." "The SART shall consist of a multi-disciplinary team including, but not limited to, the facility Health Services Administrator, facility mental health representative, PREA Compliance Manager, Facility Assistant Warden(s)/Facility Administrator and other staff as determined to be appropriate by the Warden/Facility Administrator." "The SART shall meet and provide a classification assessment using the CoreCivic 14-9A Transgender/ Intersex Assessment and Treatment Plan form no later than 72 hours (excluding weekends, holidays, and emergencies) following the receipt of the referral, to assess medical, psychological, housing, and other needs."

The CoreCivic transgender inmate policy provides the process that is used in determining housing, program and work assignments as well as preferences for searches and showers for transgender inmates. The process provided in the policy aligns with the guidance provided in the March 2016 FAQ regarding transgender inmate housing placement. A facility committee is representative of staff from

administration, classification, security, medical, and mental health.

PCM Interview - The PCM said he is notified by the staff that conduct the risk screening when an inmate identifies as transgender. He said the facility SART has a transgender committee that meets with the inmate to ask them about their views about safety in housing, work and program assignments at the facility. The committee also asks the inmate what their preference is for gender of staff for searches, pronoun preference and if they want to shower separately from the other inmates in the housing unit. This is all documented on the Transgender/Intersex Assessment and Treatment Plan form.

Inmate Interviews - Three inmates that identified as transgender said they met with the SCC Transgender Committee the second or third day after arrival at SCC. The committee asked them about their views of safety in housing, work and program assignments. They were also asked their preferences for pronouns, searches and showers.

Document Review - The Transgender/Intersex Assessment and Treatment Plan forms were reviewed for seven inmates that identified as transgender. Documentation showed that all seven met with the SCC Transgender Committee to review their views of their safety and preferences.

d) CoreCivic SCC policy 14-02 states "Placement and programming assignments for each transgender or intersex inmate/detainee shall be reassessed at least twice each year to review whether any threats to safety were experienced by the inmate/detainee." The policy reflects this provision of the standard.

Screening Staff Interview - the staff that conduct the initial screening said she tracks inmates that identify as transgender/intersex and meets with them every 6 months to review their feelings of safety in program, work, housing assignments. She also reviews showering and search preferences. She documents the meeting on the Transgender/Intersex Assessment and Treatment Plan form.

Document Review - The Transgender/Intersex Assessment and Treatment Plan forms were reviewed for Two inmate that identified as transgender at the risk assessment upon arrival more than two years ago. A meeting was documented for both every six months since their arrival.

e) CoreCivic SCC policy 14-02 states "Transgender or intersex inmate/detainee gender self-identification and self-assessment of safety needs shall be given serious consideration in all housing and program assignments." The policy reflects this provision of the standard.

Inmate Interview - Three inmates were interviewed that identified as transgender at the risk assessment. All said they were asked about their views of safety in their housing, program and work assignments a couple of days after arrival. They were also asked what their preferences were for searches and pronouns.

f) CoreCivic SCC policy 14-02 states "Transgender and intersex inmates/

detainees shall be given the opportunity to shower separately from other inmates/detainees.” The policy reflects this provision of the standard.

Inmate Interview – Three inmates that identified as transgender were interviewed. All three said they were asked if they wanted to shower separate from other inmates. All were showering at a different time than the other inmates. They all felt it was going well.

g) CoreCivic SCC policy 14-02 states “The establishment of a unit, pod or wing solely dedicated to the housing of LGBTI and/or Gender Non-Conforming inmates/detainees is strictly prohibited unless required by consent decree, court order or other comparable legal authority.”

Inmate Interviews – Three inmates were interviewed that identify as transgender and asked if they felt like their placement in their housing assignment was in a dedicated housing unit based on their gender identity. All three said no, they were placed in their housing assignment the same as other inmates. A review of their housing placement for all three found they were not together in the same unit or area of the facility. The facility does place inmates based on the sending state, Hawaii, Idaho and Montana.

PCM Interview – The PCM said he is notified by the staff that conduct the risk screening when an inmate identifies as transgender. He said the facility SART has a transgender committee that meets with the inmate to ask them about their views about safety in housing, work and program assignments at the facility. The committee also asks the inmate what their preference is for gender of staff for searches, pronoun preference and if they want to shower separately from the other inmates in the housing unit. This is all documented on the Transgender/Intersex Assessment and Treatment Plan form.

Inmate Interviews – Three inmates that identified as transgender said they met with the SCC Transgender Committee the second or third day after arrival at SCC. The committee asked them about their views of safety in housing, work and program assignments. They were also asked their preferences for pronouns, searches and showers.

Document Review – The Transgender/Intersex Assessment and Treatment Plan forms were reviewed for seven inmates that identified as transgender. Documentation showed that all seven met with the SCC Transgender Committee to review their views of their safety and preferences when they arrived at SCC.

The facility meets the provisions of the standard based on the information from interviews, policies and document reviews.

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| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |

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| | <p>Auditor Discussion</p> <p>a) SCC CoreCivic policy 14-2 states “Inmates/detainees at high risk for sexual victimization shall not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary restrictive housing for less than 24 hours while completing the assessment.”</p> <p>b) SCC CoreCivic policy 14-2 states “Inmates/detainees placed in restrictive housing pursuant to section I.8. above 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: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) the reasons for such limitations.”</p> <p>c) SCC CoreCivic policy 14-2 states “Restrictive housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.”</p> <p>The facility reported on the PAQ that no inmates were involuntarily held in restrictive housing due to high risk for victimization from the assessment during the review period.</p> <p>Interview – The Warden said an inmate has not been involuntarily placed in restrictive housing based on a high risk of victimization assessment in the last year. SCC staff will look at all alternatives in housing prior to placing an inmate involuntarily in restrictive housing.</p> <p>Staff that Supervise Segregated Housing – A Unit Manager that supervises the RHU was interviewed. He said that inmates involuntarily placed in restrictive housing for high risk of victimization would still have some access to education or other program materials through workbooks or the tablets. Restrictions to privileges and programs would be documented. A review of placement in restrictive housing is conducted 7 days after placement and then every 30 days. The goal is to get them removed from RHU as soon as it is safe to do so.</p> <p>Based on the interviews and policies reviewed, the facility meets all provisions of this standard.</p> |
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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

a) SCC CoreCivic policy 14-2 states “Inmates/detainees shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/detainees or employees for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.”

Random Staff Interview – All staff said that an inmate could make a verbal report to staff in private, call on the phone to the number posted in the housing units, write a report and put it in the mailbox. Anonymous reports can be written without a name on it and dropped in the mailbox on the yard.

Inmate Interviews – Most inmates said they could make a report of retaliation, sexual abuse and sexual harassment through the offender phone system or the tablet, write to their case manager, tell their family to report for them, or just tell any staff. Every inmate interviewed knew several methods of reporting.

Tour Observations – During the tour of the facility, PREA reporting information posters were seen in every housing unit wing, dining facility, recreation building, commissary line area, medical waiting area, visiting room and education building. PREA reporting information was observed on an inmate’s tablet as well. The posters were next to the offender phones or in waiting areas such as medical and commissary. An inmate was asked to begin a report to the SCC PREA hotline. The phone was handed to this auditor to leave a message. Staff at the facility verified the report was received shortly after making the report.

b) SCC CoreCivic policy 14-2 states “Each facility shall provide at least one way for inmates/detainees to report abuse or harassment to a public or private entity or office that is not part of CoreCivic or the contracting agency and that is able to receive and immediately forward inmate/detainee reports of sexual abuse and sexual harassment to facility officials, allowing the inmate/detainee to remain anonymous upon request.” “Inmates/detainees detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.”

PCM Interview – The PCM said inmates can report to the Eloy Police Department as the agency outside of CoreCivic. The inmates can mail a written report to Eloy PD. If they want to remain anonymous they can leave their name off of the report and envelope. When asked if the information was in the inmate handbook, most could recall that they saw it in there.

Inmate Interviews – Most inmates knew there was someone they could report to outside of the facility. If they wanted to remain anonymous they would just leave their name off of the report.

Tour Observations – Posters with information about making a report to the Eloy PD were found in the housing units. This information was also found in the inmate handbooks that are issued to every inmate at intake. It states “To make a report (including an anonymous report) to an agency outside of CoreCivic and you State Department of Corrections, write to: Eloy Police Department” the address was

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| | <p>provided.</p> <p>c) SCC CoreCivic policy 14-2 states “Employees/contractors must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.”</p> <p>Random Staff Interview – Staff said the inmates could report to them verbally, in writing, anonymously in writing or have family make a report. Staff said they are required to do an incident report for all reports of sexual abuse or sexual harassment to include verbal reports. The report must be turned in before the end of their shift on the same day.</p> <p>Inmate Interviews – Most inmates said they could make a report of retaliation, sexual abuse and sexual harassment through the offender phone system or the tablet, write to their case manager, tell their family to report for them, or just tell any staff. Every inmate interviewed knew several methods of reporting.</p> <p>d) SCC CoreCivic policy 14-2 states “CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24-hour Ethics line.”</p> <p>Random Staff Interviews – When asked how staff can make a private report, all staff said they could use the Ethics Line. They could also ask to talk to their supervisor in private to make the report. Another private way to report was to email the PCM, investigator or shift supervisor.</p> <p>Based on the interviews, tour observations, policy and documents reviewed, the facility meets all provisions of this standard.</p> |
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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>CoreCivic SCC policy 14-02 states “CoreCivic facilities do not maintain administrative procedures to address inmate/detainee grievances regarding sexual abuse unless specifically mandated by contract. Allegations of sexual abuse and/or sexual harassment are not processed through the facility inmate/detainee grievance process.” “Should a report of sexual abuse or sexual harassment be submitted and received as an inmate/detainee grievance, whether inadvertently or due to contracting agency requirements, it will immediately be referred to the facility Investigator or Administrative Duty Officer for investigation and reporting in accordance with this policy.”</p> <p>A review of the CoreCivic policy finds the agency is exempt from this standard based</p> |

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| | <p>on the FAQ from July 19, 2022. Staff that provide inmate PREA education tell the inmates that reporting sexual abuse in a grievance will automatically be sent to the investigator and not processed.</p> |
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| 115.53 | Inmate access to outside confidential support services |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-02 states “Inmates/detainees shall have access to outside victim advocates for emotional support services related to sexual abuse by being 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.” “Reasonable communication between inmates/detainees and the posted numbers for emotional support or advocacy services shall be permitted in as confidential manner as possible. The facility shall post the extent to which such communication will be monitored and/or recorded. The facility shall have a process in place to ensure that written correspondence between inmates/detainees and these agencies may remain confidential.”</p> <p>Inmate Interviews – Inmates were asked during interviews if they were aware of an outside organization that can provide services to victims of sexual abuse. Most knew there about some organization they could call but didn’t recall the name. Inmates that had reported an incident of sexual abuse while at the facility said they were offered access to a victim advocate. Some inmates recalled the staff talking about the victim advocate organization during intake orientation.</p> <p>Tour Observations – Southern Arizona Center Against Sexual Assault has an MOU with SCC to provide victim advocate services to inmates that have been victims of sexual abuse through a hotline from the inmate phone or through writing to them at provided addresses. The phone number for SACASA was posted on every inmate phone in the housing units and also on the inmate tablets that are issued to every inmate. Information about emotional support services is provided in both Idaho and Hawaii inmate handbooks with the phone number and mailing address.</p> <p>b) CoreCivic SCC policy 14-02 states “Inmates/detainees shall be informed, prior to giving them access, of the extent to which such communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.”</p> <p>Document review – The CoreCivic PREA brochure informs inmates that the hotlin to rape crisis centers is not monitored and confidential. It also explains the limits of confidentiality. The inmate handbooks also inform inmates that calls to the SACASA number are confidential and not monitored.</p> <p>c) CoreCivic SCC policy 14-02 states “CoreCivic shall maintain, or attempt to</p> |

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| | <p>enter into, Memorandums of Understanding (MOU) or other agreements with community service providers that are able to provide inmates/detainees with confidential emotional support services related to sexual abuse.”</p> <p>Document Review - SCC has a memorandum of understanding with Southern Arizona Center Against Sexual Assault to provide inmate victims of sexual abuse victim advocate services to inmate victims of sexual abuse through a hotline at the facility or by mail. This MOU was signed in March 25, 2021 for a period of three years.</p> <p>The facility meets the provisions of this standard based on the interviews, documents and policies reviewed.</p> |
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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>SCC CoreCivic policy 14-2 states “CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24-hour Ethics line at 1-866-757-4448 or through www.CoreCivic.ethicspoint.com.” Signs were observed throughout the facility with this information. During random staff interview, all staff knew of a phone number they could make a third party report of sexual abuse or sexual harassment on behalf of an inmate. During inmate interviews, most inmates said their family could call a phone number to make a report of sexual abuse or sexual harassment on their behalf. This information is posted on the Saguaro Correctional Center webpage at https://www.corecivic.com/facilities/saguaro-correctional-center.</p> |

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-02 states “In accordance with this policy, employees/ contractors are required to report immediately any knowledge suspicion, or information regarding, an incident of sexual abuse of sexual harassment that has occurred in any facility (including a facility that is not part of CoreCivic).”</p> <p>Random Staff Interviews - Staff were asked to describe their responsibilities and process if an inmate were to make a report of sexual assault/abuse to them. All staff said they would separate the victim from other inmates, keep the victim with them, talk to the victim in private and immediately report that information to the shift supervisor.</p> |

Ethics Line posters were observed in the custody staff pre-shift area and in the administration building. The posters tell staff about the new policy Speaking Up and Non-retaliation. It encourages staff to report misconduct.

b) CoreCivic SCC policy 14-02 states “Employees/contractors must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.”

Random Staff Interviews - Staff were asked if they receive a verbal report of sexual abuse from an inmate, were they required to write a report with the details of what the inmate told them and their actions in response. All staff said they would do an incident report and were required to turn in the report as soon as possible or prior to leaving their shift.

c) CoreCivic SCC policy 14-02 states “Unless otherwise precluded by federal, state, or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined in this policy. At the initiation of providing medical care, both medical and mental health professionals will inform inmates/detainees of their professional duty to report and the limitations of confidentiality.”

Medical Staff Interview - Two medical staff were interviewed. Both knew that they were required to report any sexual abuse incident report from an inmate that happened in a correctional institution to facility investigators. One of the staff said she had a report of sexual harassment from an inmate a few years ago. She had informed the inmate she had a duty to report and she immediately contacted the shift supervisor.

Mental Health Staff Interview - The mental health staff interviewed stated he informs inmates at the beginning of services that he must report any incident of sexual abuse and sexual harassment that occurred in a corrections setting. He has not had to report anything in the last year.

d) CoreCivic SCC policy 14-02 states “If the alleged victim is under the age of 18 or is considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the investigating entity responsible for criminal investigations and the contracting agency under applicable mandatory reporting laws.”

PCM Interview - If an inmate that would meet the definition of a vulnerable adult reported an incident of sexual abuse, the PCM said the facility would contact the Arizona Adult Protective Services as required.

e) Warden Interview - If the facility receives a third party report from a family member, The warden said the information is immediately provided to the Facility Investigator. If the Facility Investigator determines a possible criminal violation has occurred, he will contact the Eloy PD to do a criminal investigation.

The facility meets the provisions of the standard based on interviews, tour observations, policies and documents reviewed.

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>CoreCivic SCC policy 14-02 states “When it is learned that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee.”</p> <p>Agency Head Interview – If an inmate reported being in imminent risk of sexual abuse, the Vice President said the staff will take immediate action to protect the inmate by separating from the alleged perpetrator.</p> <p>Warden Interview – The Warden said staff would take immediate action to separate the victim and perpetrator if there was an imminent risk of sexual abuse. The inmate perpetrator could be placed in segregation or staff would be placed on a post away from the victim or suspended temporarily if needed.</p> <p>Random Staff Interviews – All staff interviewed said if an inmate were in imminent risk of sexual abuse, they would take immediate action to protect the inmate by separating them from other inmates and keeping the inmate with them while they notify the shift supervisor.</p> <p>The facility reported on the PAQ no instances of imminent risk of sexual abuse requiring immediate action during the review period.</p> <p>The facility meets this standard based on the information from interviews and policy reviewed.</p> |

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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a-c) If an inmate at SCC reports an incident of sexual abuse that occurred at another facility, CoreCivic SCC policy 14-02 requires the Warden to provide the information received from the inmate at SCC to the facility head of the facility where the incident was alleged to have occurred within 72 hours. The policy requires SCC to document that it has provided the information through the 5-1B Notice to Administration.</p> <p>CoreCivic SCC policy 14-02 states “When The Warden/Facility Administrator of the facility that received the allegation shall notify the Warden/Facility Administrator or appropriate headquarters office of the facility or agency where the alleged abuse took place as soon as possible, but no later than 72hours after receiving the allegation.”</p> |

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| | <p>The facility reported on the PAQ one alleged report of sexual abuse was received from an inmate at SCC for an incident that occurred at another facility. The PCM said that was an error and there were no reports of this kind during the review period.</p> <p>PCM Interview – The PCM said if the facility receives a report of sexual abuse that occurred at SCC from an inmate at another facility, it will be assigned for investigation and the facility will coordinate additional inmate interviews with the holding facility.</p> <p>d) CoreCivic SCC policy 14-02 states “Upon receiving notification from another facility that an incident/allegation of sexual abuse had occurred while the inmate/detainee was previously confined at the facility, the following actions shall be taken.”</p> <p>PCM Interview - If an inmate at SCC reports an incident of sexual abuse that occurred at another facility, the Facility investigator will get the report from the alleged victim and send it to the Warden to be forwarded to the facility where the incident took place. The PCM said the PAQ indicates one report of sexual abuse was received from another facility during the review period. He provided an email from Hawaii DOC for review. Upon review, the report was for an alleged incident of sexual harassment based on the statement of the alleged victim sent by the investigator in Hawaii. This is not a report of sexual abuse that is covered by the standard.</p> <p>Warden Interview – During his interview, the Warden said if an inmate at SCC reports an incident of sexual abuse that occurred at another facility, he would forward information to the facility head of the other facility. This would be done within 72 hours and documented. The Warden said if he receives a report of an incident of sexual abuse that occurred at SCC from an inmate at another facility, he would provide the information to the Facility Investigator to conduct an investigation.</p> <p>The facility meets the provisions of this standard based on information from interviews, policy and document review.</p> |
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| 115.64 | Staff first responder duties |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-02 requires security staff first responders to: separate the victim from the alleged abuser, preserve and protect evidence at the scene and/or on the victim, take the victim to medical, and notify the highest supervisory authority on site.</p> <p>b) CoreCivic SCC policy 14-02 states “If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then shall notify security staff.”</p> |

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| | <p>Random Staff Interviews - Both security staff and non-security staff were selected at random from shift rosters for interview. All staff were asked to describe their responsibilities and steps they are required to complete when an inmate makes a report of sexual abuse/sexual assault to them. All staff said they were required to separate the victim from the perpetrator, protect evidence on the victim and at the scene, notify the shift supervisor and wait for custody staff to come take the inmate to medical or take the inmate to medical if asked. Non-security staff would be notifying security staff when they notify the shift supervisor (a captain or lieutenant) of the report of sexual abuse.</p> <p>Document Review - The facility reported there were no incidents of non-security staff first responders during the review period. A review of the investigations found that staff first responders acted in accordance with the requirements of this standard.</p> <p>The facility meets the provisions of this standard based on the information gathered from interviews, policy and document review.</p> |
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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The coordinated response plan was included in CoreCivic SCC policy 14-02 under section L and M. The plan described a Sexual Assault Response Team that included the PCM or Duty Officer, Medical staff, Security Staff, Mental Health Staff, and the Victim Services Coordinator. The plan requires the SART assignments to be made by the PCM or ADO in response to a report of sexual abuse. The plan defined the responsibilities of first responders, security supervisors, executive staff, medical staff, and investigators.</p> <p>Warden Interview - The Warden said when an inmate makes a report of sexual abuse the first responder notifies the shift supervisor and protects the inmate and evidence. The shift supervisor has the inmate taken to medical for treatment or to arrange for a forensic exam if required. The shift supervisor notifies the PCM, ADO, the Facility Investigator and him of the report.</p> <p>Random Staff Interviews - All staff were aware of their responsibilities as part of the facility response plan to reports of sexual abuse.</p> <p>The facility meets this standard based on the information from interviews and policy review.</p> |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>A memorandum from the Warden to this auditor states that “CoreCivic Saguaro Correctional Center is not subject to collective bargaining.” The PREA Coordinator stated during his interview though some CoreCivic facilities do have collective bargaining, Saguaro Correctional Center does not and is not prohibited from removing alleged staff abusers form contact with inmates during an investigation.</p> <p>Given that Saguaro Correctional Center does not have collective bargaining, the facility meets this standard.</p> |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-02 states “Inmates/detainees and staff who report sexual abuse or sexual harassment (or cooperate with sexual abuse or sexual harassment investigations) shall be protected from retaliation by other inmates/detainees or staff.”</p> <p>b-d) CoreCivic SCC policy 14-02 states “For at least 90 days (30/60/90) following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates/detainees who reported sexual abuse and inmates/detainees who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation against them by inmates/detainees or staff. The facility shall employ multiple protection measures to monitor retaliation against inmates/detainees including but are not limited to, (a) housing changes or transfers for inmate/detainee victims or abusers, (b) removal of alleged staff or inmate/detainee abusers from contact with victims, (c) emotional support services for inmates/detainees who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, (d) periodic status checks, and (e) monitoring disciplinary reports, housing or program changes”</p> <p>CoreCivic SCC policy 14-02 states “For at least 90 days (30/60/90) following a report of sexual abuse, the agency shall monitor the conduct and treatment of staff who reported sexual abuse to see if there are changes that may suggest possible retaliation by inmates/detainees or other staff.”</p> <p>e) CoreCivic SCC policy 14-02 states “If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.”</p> <p>f) CoreCivic SCC policy 14-02 states “The facility obligation to monitor retaliation</p> |

for staff and inmates/detainees shall terminate if the facility determines that the allegation is unfounded.”

Staff Designated to Conduct Retaliation Monitoring – The staff designated to conduct all retaliation monitoring at SCC was interviewed. She said she is contacted immediately after a report of sexual abuse or sexual harassment. She meets with the inmate initially to inform them she will be monitoring for retaliation and there will be a meeting every 30 days. If anything occurs between meetings, the inmate should contact her or tell other staff about the retaliation. She reviews housing assignments, conduct, program changes for any sudden changes. If she sees anything, she will ask the inmate if there is an issue. She also contacts the inmate’s case manager for information about possible retaliation. If retaliation is suspected or there is evidence of retaliation, she contacts the PCM who has an investigation started. Monitoring will last up to 90 days and it can go longer if needed. If there is an unfounded investigation outcome, she stops the monitoring.

Agency Head Interview – The facilities have staff designated to monitor for retaliation. Retaliation against a person that reported sexual abuse by staff or inmates is prohibited. All suspected retaliation is investigated and acted upon accordingly.

Warden Interview – If retaliation is suspected or there is evidence of retaliation, the Warden said he would have the Facility Investigator conduct an investigation. If an inmate is found retaliating against another inmate or staff, he can be disciplined an/or transferred if needed. If staff are retaliating against an inmate or staff, he or she can be discipline up to termination.

Document Review – Retaliation monitoring was conducted in fourteen of the twenty investigations reviewed for both sexual abuse and sexual harassment cases.

Monitoring was documented on a PREA Retaliation Monitoring Report form every 30 days. There was thorough documentation of what was reviewed for signs of retaliation.

Inmates that reported sexual abuse – Inmates that reported sexual abuse were interviewed. All reported meeting with a staff member several times and being asked if they think anyone was retaliating against them.

The facility exceeds the provisions of this standard based on the information from interviews, policy and documents reviewed. Monitoring meetings were conducted with inmates for reports of both sexual abuse and sexual harassment. This exceeds the standard's requirement for monitoring meetings with inmates for sexual abuse only.

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

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| | <p>CoreCivic SCC policy 14-02 requires any involuntary use of restrictive housing to protect an inmate that reported sexual abuse shall be subject to the requirements outlined for inmates that are determined to be high risk of victimization from the PREA assessment (115.43). These requirements were provided for standard 115.43 and include reviewing all housing alternatives to placement in restrictive housing and documenting any restrictions to privileges, programming or work assignments. The restrictive housing placement is to be reviewed every 30 days to determine if there is a continued need for separation.</p> <p>Warden Interview – If an inmate is placed in restrictive housing involuntarily after reporting sexual abuse, the Warden said staff would have staff review other housing alternatives. If no safe housing alternative is available in open population, they may contact the sending state for possible return to that state DOC.</p> <p>Staff who Supervise Segregation - A Unit Manager that supervises the RHU was interviewed. He said that inmates involuntarily placed in restrictive housing after a report of sexual abuse would still have some access to education or other program materials through workbooks or the tablets. Restrictions to privileges and programs would be documented. A review of placement in restrictive housing is conducted 7 days after placement and then every 30 days. The goal is to get them removed from RHU as soon as it is safe to do so.</p> <p>There were no inmates to interview that were involuntarily placed in segregation after a report of sexual abuse during the onsite audit.</p> <p>The facility meets the standard based on information from interviews and the policy reviewed.</p> |
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| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>115.71</p> <p>a) CoreCivic SCC policy 14-02 states “Facility administrative investigations into allegations of sexual abuse and sexual harassment shall be done promptly, thoroughly and objectively for all allegations including third-party reports and anonymous reports.”</p> <p>Facility Investigator Interview – The Facility Investigator said he receives information from a report of sexual abuse or sexual harassment the same day or next day depending on the type of incident. He responds immediately to reports. If it is third party or anonymous, the process is the same. He will follow up with a third party reporter if he needs more information. He will investigate an anonymous report the best he can based on the information provided in the report.</p> |

Investigation File Review – During the review period there were twenty reports of sexual abuse or sexual harassment. Fourteen reports of sexual harassment and 6 reports of sexual abuse. All twenty investigations were reviewed. The investigations were prompt as they were started immediately after a report was sent to the investigator. The Investigator interviewed the alleged victim once he has gathered any incident reports that include the initial statement of the victim. The investigator interviewed the alleged victim, identified witnesses, available video, and the perpetrator.

b) CoreCivic SCC policy 14-02 states “The facility shall use investigators for administrative investigations who have received special training in sexual abuse investigations pursuant to Standards 115.34.”

Facility Investigator Interview – The Facility Investigator said he has completed training with the Arizona Investigator Association and the NIC PREA investigations training online.

Investigation File Review – Twenty administrative investigations for sexual abuse and sexual harassment were reviewed. The designated Facility Investigator conducted 9 of the 20 investigations. Another staff member completed 11 of the 20 investigations. Training documentation was requested for the second investigator.

CORRECTIVE ACTION REQUIRED: Through the review of investigation files, it was discovered that another facility staff was conducting investigations in addition to the designated Facility Investigator. Documentation of his training was requested and could not be provided. This resulted in a corrective action where the staff must complete the required training or discontinue conducting investigations. All investigations completed by the untrained staff person must be reviewed by the trained Facility Investigator and approved.

Corrective Action Completed: A training certificate for completion of the NIC Investigating Sexual Abuse in a Confinement Setting was provided after the onsite audit. This corrective action is now completed. The Facility Investigator reviewed and approved all investigations completed by the untrained investigator. Documentation of the review was provided.

CORRECTIVE ACTION REQUIRED: During the review of investigation files, it was observed that staff designated as first responders were interviewing the alleged perpetrator and potential witnesses, thereby conducting an investigation. This resulted in a corrective action where the first responder staff would either have to complete the required specialized investigations training or stop questioning the perpetrator and witnesses. They would need to be limited to getting an initial statement from the victim to determine what evidence may need protecting and how to keep the victim safe.

Staff will be instructed by the Warden only to gather information from the alleged victim about what happened to provide to investigators and to determine if evidence needs to be protected. Completed investigation files will be provided for review for 60 days to determine if the practice is compliant.

c) CoreCivic SCC policy 14-02 states “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.”

Facility Investigator Interview – The Facility Investigator said in conducting administrative investigations he reviews video monitoring evidence, physical evidence, conducts interviews with the alleged victim, witnesses, and the alleged perpetrator. He will review the conduct and PREA history for the alleged victim, inmate perpetrator and staff perpetrator.

Eloy PD MOU – This standard is written into the MOU with Eloy PD for criminal investigations.

d) CoreCivic SCC policy 14-02 states “When the quality of evidence appears to support criminal prosecution, the investigating entity shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

Outside Agency – SCC has an MOU with the Eloy Police Department to conduct criminal investigations. The MOU was provided for review. The requirement for consulting with the prosecutor prior to compelled interviews has been communicated to Eloy PD through the MOU.

e) CoreCivic SCC policy 14-02 states “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate/detainee or staff. No agency shall require an inmate/detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.”

Facility Investigator Interview – The Facility Investigator said he reviews the prior conduct and PREA reports for the alleged victim, alleged perpetrator and potential witnesses to determine credibility on an individual basis. He doesn’t use their status as an inmate to determine credibility. He said he would not use a truth telling device on a victim.

Eloy PD MOU – This standard is written into the MOU with Eloy PD for criminal investigations.

f) CoreCivic SCC policy 14-02 states “Administrative Investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse.”

Investigation File Review – twenty administrative investigation files were reviewed. Most documented that staff followed policy and procedure as part of the investigation.

Facility Investigator Interview - The Investigator was asked if this was in reference to

reviewing if staff actions or failure to act contributed to the incident. He said that is what he meant by determining if staff followed policy and procedure. It is recommended that Investigators change the wording to reflect the standard in the reports more clearly.

g) CoreCivic SCC policy 14-02 states "Criminal investigations shall be documented in a written report that contains a of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible."

Outside Agency - SCC has and MOU with the Eloy Police Department to conduct criminal investigations of sexual abuse at SCC. The requirement of this standard is written into the MOU and has been communicated to the Eloy PD.

h) CoreCivic SCC policy 14-02 states "Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution" The policy reflects the requirements for this provision of the standard.

Outside Agency - SCC has and MOU with the Eloy Police Department to conduct criminal investigations of sexual abuse at SCC. The requirement of this standard is written into the MOU and has been communicated to the Eloy PD. Police Department conducted a criminal investigation of three reports of sexual abuse during the review period. One is still ongoing, one was not filed for lack of evidence and one was referred to the prosecutor, but was declined by the prosecutor.

i) CoreCivic SCC policy 14-02 states "The agency shall retain all investigative reports into allegations of sexual abuse for as long as the alleged abuser is incarcerated or employed by the agency, plus five years." The policy reflects the requirements for this provision of the standard.

j) CoreCivic SCC policy 14-02 states "The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation."

Facility Investigator Interview - The investigation is continued and he will attempt to make contact with the alleged perpetrator by phone for interview if this has not been done prior to them leaving. If there is a criminal investigation the Eloy PD will continue the investigation.

l) CoreCivic SCC policy 14-02 states "The facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation."

Facility Investigator Interview - The Facility Investigator said if there is a criminal investigation, he stays in contact with the Eloy PD investigator. He assists the investigator in reviewing video evidence, collection of physical evidence, and arranging interviews with the victim and perpetrator.

CORRECTIVE ACTION REQUIRED: During the review of investigation files, it was observed that staff designated as first responders were interviewing the alleged

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| | <p>perpetrator and potential witnesses, thereby conducting an investigation. This resulted in a corrective action where the first responder staff would either have to complete the required specialized investigations training or stop questioning the perpetrator and witnesses. They would need to be limited to getting an initial statement from the victim to determine what evidence may need protecting and how to keep the victim safe.</p> <p>Staff will be instructed by the Warden, or designee, to only gather information from the alleged victim regarding what happened to provide to investigators and to determine if evidence needs to be protected. Completed investigation files will be provided for review to determine if the practice meets the standard.</p> <p>Corrective Action Completed: Five investigation files were provided for review that were completed during the 90 days following the interim report. In all five investigations, the shift supervisors collected initial information from the inmate victim regarding a report of sexual abuse or sexual harassment and provided that information to the Facility Investigator. Staff did not interview the perpetrator and witnesses. The inmate victims were asked to write statements that were forwarded by the Shift Supervisor to the investigator. A staff that was conducting investigations completed the NIC specialized sexual abuse investigations training to be qualified to conduct PREA investigations. Only qualified investigators completed the investigation reviewed. Based on the review of investigations and other documents provided, the facility has completed the corrective action.</p> |
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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>CoreCivic SCC policy 14-2 states “In any sexual abuse or sexual harassment investigation in which the facility is the primary investigating entity, the facility shall utilize a preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place.”</p> <p>Facility Investigator Interview – The Facility Investigator was asked what standard of evidence he used to substantiate a sexual abuse or sexual harassment investigation. He said he used the preponderance of evidence, which is more likely than not or more than 50% of the evidence shows either the incident did happen as reported or did not happen as reported (unfounded).</p> <p>Document Review – Twenty administrative investigation files were reviewed for the evidence standard used in determining the outcome. A description of evidence relied on to support the findings was found in all cases that supported preponderance of the evidence as the standard.</p> <p>The facility meets this standard based on the information from the Investigator interview and the review of the administrative investigation files.</p> |

115.73

Reporting to inmates

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

a) CoreCivic SCC policy 14-2 states "Following an investigation into an inmate/detainee's allegation that he/she suffered sexual abuse at the facility, the inmate/detainee shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded." The policy reflects this provision of the standard.

The facility reported in the PAQ there were two cases of inmate sexual abuse where the victim was notified of the outcome during the review period. During the review of investigations it was verified that the victim was notified of the outcome in both inmate sexual abuse cases.

Warden Interview - The Warden said all inmates are notified of the outcome for both sexual abuse and sexual harassment investigations by the Facility Investigator.

Investigator Interview - The Investigator said he notifies the alleged victims of the investigation outcome for sexual abuse and sexual harassment involving staff and inmate perpetrators. The Inmate/Detainee PREA Allegation Status Notification form is signed and filed in the inmate record.

Inmates that reported sexual abuse interview - All inmates interviewed that had reported sexual abuse while housed at SCC said they were notified of the outcome of the investigation.

Document Review - Twenty completed investigation files were provided for review. A documented Inmate/Detainee PREA Allegation Status Notification form was observed for all twenty investigations.

b) CoreCivic SCC policy 14-2 states "If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform the inmate/detainee." The policy reflects this provision of the standard.

The facility reported on the PAQ two incidents of sexual abuse were investigated by an outside agency. The inmate victims were notified verbally of the criminal investigation outcome by the Facility Investigator in addition to the notice of outcome for the administrative investigation.

c) CoreCivic SCC policy 14-2 states "Following an inmate/detainee's allegation that an employee has committed sexual abuse against the inmate/detainee, the facility shall subsequently inform the inmate/detainee (unless the facility has determined that the allegation is unfounded) whenever: a. The employee is no longer posted within the inmate/detainee's unit as a result of the findings of the investigation; b. The employee is no longer employed at the facility as a result of the allegation; c. The facility learns that the employee has been indicted on a charge

related to sexual abuse within the facility; or d. The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility.” The policy reflects this provision of the standard.

Document Review - Twenty completed investigation files were provided for review. Thirteen investigations involved alleged staff sexual abuse or sexual harassment. A documented Inmate/Detainee PREA Allegation Status Notification form was observed for all thirteen investigations.

d) CoreCivic SCC policy 14-2 states “Following an inmate/detainee's allegation that he/she has been sexually abused by another inmate/detainee, the facility shall subsequently inform the alleged victim whenever: a. The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or b. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.” The policy reflects this provision of the standard.

Inmates that reported sexual abuse interview - All inmates interviewed that had reported sexual abuse while housed at SCC said they were notified of the outcome of the investigation.

Document Review - Twenty completed investigation files were provided for review. Eight investigations involved an alleged inmate perpetrator. A documented Inmate/Detainee PREA Allegation Status Notification form was observed for all eight investigations.

e) CoreCivic SCC policy 14-2 states “All inmate/detainee notifications or attempted notifications shall be documented on the 14-2E Inmate/Detainee Allegation Status Notification. The inmate/detainee shall sign the 14-2E, verifying that such notification has been received. The signed 14-2E shall be filed in the inmate/detainee's institutional file.” The policy reflects this provision of the standard.

f) CoreCivic SCC policy 14-2 states “The facility obligation to notify the inmate/detainee as outlined in this section shall terminate if the inmate/detainee is released from CoreCivic custody.” The policy reflects this provision of the standard.

Document Review - Twenty completed investigation files were provided for review. A documented Inmate/Detainee PREA Allegation Status Notification form was observed for all twenty investigations.

The facility Exceeds this standard based on information gathered from the interviews, documents and policies reviewed. The standard requires a notification of the investigation outcome for sexual abuse cases only, however SCC is providing a written notification of outcome for both sexual abuse and sexual harassment investigations that exceeds the standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

a) CoreCivic SCC policy 14-2 states “Employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic sexual abuse or sexual harassment policies.” The policy reflects the provision of the standard.

b) CoreCivic SCC policy 14-2 states “Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.” The policy reflects the provision of the standard.

During the review period there were no substantiated cases of staff sexual harassment. There was one substantiated administrative investigation of staff sexual misconduct for staff kissing an inmate while having an inappropriate relationship.

The staff was terminated for violation of policy determined in the administrative investigation. That case was referred to the Eloy Police Department for criminal investigation as well. During the audit, this auditor asked if the Eloy PD had provided the facility with an investigation report and outcome for this case. The Facility Investigator contacted the Eloy PD to inquire. The facility received an email response from the Eloy PD stating this case was dropped as there was no criminal violation as there was no verifiable sexual contact by staff with the inmate. This email was provided to the auditor.

c) CoreCivic SCC policy 14-2 states “Disciplinary sanctions for employee violations of CoreCivic policies relating to sexual abuse or sexual harassment (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.” The policy reflects the provision of the standard.

d) CoreCivic SCC policy 14-2 states “All employee terminations for violations of CoreCivic sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.” The policy reflects the provision of the standard.

During the review period there was one substantiated administrative investigation of staff sexual misconduct for staff kissing an inmate while having an inappropriate relationship. The staff was terminated for violation of policy determined in the administrative investigation. The staff terminated was not a licensed employee, therefore there was no referral to a licensing board. The case was referred to Eloy Police Department for criminal investigation as well. During the audit, this auditor asked if Eloy PD had provided the facility with an investigation report and outcome for this case. The Facility Investigator contacted Eloy PD to inquire about the status of the case. The facility received an email response from Eloy PD stating this case was declined by the prosecutor because there was no verifiable sexual contact by staff with the inmate, there was no criminal code violation. This email was provided to the auditor.

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| | The facility meets the provisions of this standard based on the documents and policy reviewed. |
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| 115.77 | Corrective action for contractors and volunteers |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-2 states “Any civilian, volunteer, or contractor who engages in sexual abuse shall be prohibited from contact with inmates/detainees and shall be reported to law enforcement agencies and to any relevant licensing body.” The policy reflects the provision of the standard.</p> <p>CoreCivic SCC policy 22-01 Volunteer Services and Management state “Relationships that are beyond or outside the scope of the approved volunteer service being provided by the volunteer constitute grounds for immediate termination or removal from the Volunteer Roster.”</p> <p>The facility reported no volunteers were reported to law enforcement during the review period. This auditor found no allegations of sexual harassment or sexual abuse against a volunteer in the review of twenty investigation files for the review period.</p> <p>b) CoreCivic SCC policy 14-2 states “Any other violation of CoreCivic sexual abuse or sexual harassment policies by a contractor will result in appropriate corrective action up to and including restricting contact with inmates/detainees and removal from the facility.” The policy reflects the provision of the standard.</p> <p>Warden Interview - During his interview, the Warden said a contract staff’s access to the facility would be removed if they are the subject of a substantiated administrative investigation of sexual abuse. These cases would also be referred to Eloy PD for criminal investigation and possible referral for prosecution.</p> <p>The facility meets the provisions of this standard based on information from the Warden interview and policies reviewed.</p> |

| 115.78 | Disciplinary sanctions for inmates |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-2 states “Inmates/detainees shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate/detainee engaged in inmate/detainee-on-</p> |

inmate/detainee sexual abuse or following a criminal finding of guilt for inmate/detainee-on-inmate/detainee sexual abuse.” The policy reflects the provision of the standard.

The facility reported on the PAQ there were no administrative findings of inmate-on-inmate sexual abuse in the last 12 months. The facility also reported no criminal findings of guilt for inmate-on-inmate sexual abuse during the review period. The review of all investigations completed during the review period confirmed there were no substantiated cases of sexual abuse by an inmate.

b) CoreCivic SCC policy 14-2 states “Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate/detainee's disciplinary history, and the sanctions imposed for comparable offenses by other inmates/detainees with similar histories.” The policy reflects the provision of the standard.

Seven investigation files were reviewed involving inmate perpetrators for the review period. There were no inmates disciplined as a result of a substantiated finding.

c) CoreCivic SCC policy 14-2 states “The disciplinary process shall consider whether an inmate/detainee's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.” The policy reflects the provision of the standard.

d) CoreCivic SCC policy 14-2 states “If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the alleged perpetrator to participate in such interventions as a condition of access to programming or other benefits.” The policy reflects the provision of the standard.

e) CoreCivic SCC policy 14-2 states “An inmate/detainee may be disciplined for sexual conduct with an employee only upon a finding that the employee did not consent to such contact.” The policy reflects the provision of the standard.

f) CoreCivic SCC policy 14-2 states “Inmates/detainees who deliberately allege false claims of sexual abuse may be disciplined. For the purposes of a 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 the investigation does not establish evidence sufficient to substantiate the allegation.” The policy reflects the provision of the standard.

g) CoreCivic SCC policy 14-2 states “Sexual activity between inmates/detainees is prohibited in all CoreCivic facilities, and inmates/detainees may be disciplined for such activity. Such activity shall not be deemed sexual abuse if it is determined that the activity is not coerced.” The policy reflects the provision of the standard.

Warden Interview - The Warden said inmates may be subject to disciplinary sanctions if there is a substantiated finding in an incident of sexual abuse involving an inmate perpetrator. The sanctions would be progressive based on the inmates discipline history and take into account any mitigating circumstances, such as mental illness or

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| | <p>disabilities. Inmates would only be disciplined for committing sexual offenses against staff that did not consent.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p> |
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| 115.81 | Medical and mental health screenings; history of sexual abuse |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 14-02 states “Inmates/detainees identified during the intake screening as at risk for sexual victimization with a history of prior sexual victimization whether it occurred in an institutional setting or the community shall be offered a follow-up meeting with a medical or mental health practitioner or other qualified professional within 14 days of the intake screening.” The policy reflects the requirements of this provision of the standard.</p> <p>Risk Screening Staff – The staff that conduct the initial and re-assessment risk screening said they offer mental health services to inmates that report being a prior victim of sexual abuse either in the community or in an institution. The offer is documented on a PREA Risk Assessment Medical and Mental Health Follow-Up form.</p> <p>Inmate Interview – Three inmates that reported being a prior victim of sexual abuse on the initial screening were interviewed. All three reported being offered mental health services within two weeks of arrival. One inmate reported being a prior victim of sexual abuse on the re-assessment and was offered mental health services the same day.</p> <p>Document Review – Forty Screening Assessments were selected randomly and reviewed for inmates that arrived in the last year. Three reported being a prior victim of sexual abuse. All three were referred to MH within 14 days of arrival at SCC or reporting on the re-assessment to staff.</p> <p>b) CoreCivic SCC policy 14-02 states “Inmates/detainees, excluding jail inmates/detainees, identified during the intake screening as high risk with a history of sexually assaultive behavior, whether it occurred in an institutional setting or in the community, shall be offered a follow-up meeting with a mental health practitioner or other qualified professional within 14 days of the intake screening.” The policy reflects the requirements of this provision of the standard.</p> <p>Risk Screening Staff Interview – The staff that conduct risk screenings said they offer mental health services for prior perpetrators of sexual abuse within 14 days.</p> <p>Mental Health Staff Interview – Mental Health staff said the inmates that are prior perpetrators of sexual abuse are offered mental health services within 14 days of</p> |

arrival.

Document Review – Forty Risk Screenings were reviewed for randomly selected inmates that arrived in the last 12 months. Ten inmates were documented as having a prior conviction for sex offenses against a child or adult but had no mental health referral offered. The staff that complete the risk screening said they were only referring a prior perpetrator of sexual abuse that occurred in an institution.

CORRECTIVE ACTION REQUIRED: The policy requires prior perpetrators of sexual abuse in the community to be referred to mental health. This is in reference to convicted sex offenders. The facility will be required to change the practice to match the policy. All inmates with a prior conviction for a sex offense against a child or adult will be referred to mental health with in 14 days of arrival. The risk assessment and mental health referral form will be provided for review for all inmates with a prior conviction for sex offenses against a child or adult for 60 days.

d) CoreCivic SCC policy 14-02 states “Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.” The policy reflects the requirements of this provision of the standard.

Tour Observation – medical files were located in an office that was in an area restricted to inmates. The files were in locked cabinets and a locked office.

Risk Screening Staff Interviews – all staff that complete risk assessments said the information obtained during the screening is confidential and limited access to authorized staff.

e) CoreCivic SCC policy 14-02 states “Medical and mental health practitioners shall obtain informed consent from inmates/detainees before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate/detainee is under the age of 18.” The policy reflects the requirements of this provision of the standard.

Mental Health Staff Interview – The mental health staff interviewed said if an inmate reported prior sexual abuse that occurred outside of a correctional institution, he would have to be given consent to share that information with facility investigators.

Medical Staff Interview – The medical staff interviewed said if an inmate reported prior sexual abuse that occurred outside of a correctional institution, she would have to be given consent to share that information with facility investigators.

CORRECTIVE ACTION REQUIRED: The policy requires prior perpetrators of sexual abuse in the community to be referred to mental health. This is in reference to convicted sex offenders. The facility will be required to change the practice to match the policy. All inmates with a prior conviction for a sex offense against a child or adult

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| | <p>will be referred to mental health within 14 days of arrival. The risk assessment and mental health referral form will be provided for review for all inmates with a prior conviction for sex offenses against a child or adult for 60 days.</p> <p>Corrective Action Completed: The facility provided risk assessments for all sex offenders received in the 90 days following the Interim report. The Risk Assessment Medical and Mental Health Follow-up forms were provided for review for ten inmates with sex offense convictions that offer services to prior victims of sexual abuse or prior perpetrators of sexual abuse. The forms were checked for “screening indicates that the inmate has previously perpetrated sexual abuse.” The inmate initials that they understand the offer and could initial acceptance or decline the offer. The inmate and staff witness signed the form. The practice follows the CoreCivic policy and meets the standard.</p> |
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| 115.82 | Access to emergency medical and mental health services |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) CoreCivic SCC policy 13-79 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates/detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.”</p> <p>Medical Staff interview - The Medical Staff said a victim of sexual abuse or sexual assault would be evaluated for emergent injuries, stabilized and sent to the local hospital for emergency medical services.</p> <p>Inmates that Reported Sexual Abuse - inmates that reported sexual abuse during the review period said they were seen by medical but did not have serious medical injuries that would need emergency services.</p> <p>b) Staff Interviews - All randomly selected staff were asked about first responder duties. All staff said the facility has 24 hour nursing and would not have a situation where medical staff are not on duty. All staff said they would protect the victim, notify the shift supervisor and wait for other custody staff and medical staff to respond. Some said they could take the inmate to medical if needed.</p> <p>c) CoreCivic SCC policy 13-79 states “Inmate/detainee victims of sexual abuse shall be offered testing for sexually transmitted infections and timely information about, and timely access to, emergency contraception and sexually transmitted infection prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview - Medical staff said victims of sexual assault/sexual abuse can</p> |

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| | <p>be offered STI testing and treatment at the emergency room or at the facility.</p> <p>d) CoreCivic SCC policy 13-79 states “Treatment services shall be provided to all victims of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>Inmates that reported Sexual Abuse – inmates that reported sexual abuse said they were offered mental health and medical services. The offer wasn’t contingent upon their cooperation. They refused services, therefore they were not charged.</p> <p>The facility meets the provisions of this standard based on information from interviews, policy and document reviews.</p> |
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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 13-79 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates/detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.” The policy reflects the requirements of this provision of the standard.</p> <p>b) CoreCivic SCC policy 13-79 states “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.” The policy reflects the requirements of this provision of the standard.</p> <p>Medical Staff Interview – The two medical staff interviewed said that an inmate victim would be offered a mental health referral, medical monitor and treatment of wounds or injuries and access to medications for STI.</p> <p>Mental Health Staff Interview – The mental health staff interviewed said mental health follow up services and treatment would be offered and provided to the inmate victim of sexual abuse. Referral could be made to outside services upon release.</p> <p>c) CoreCivic SCC policy 13-79 states “The facility shall provide such victims with medical and mental health services consistent with the community level of care.” The policy reflects the requirements of this provision of the standard.</p> <p>Medical and Mental Health Staff Interview – all medical and mental health staff said the level of care they can provide is consistent with the community level of care.</p> <p>Document Review – medical records were provided for review with reports of sexual</p> |

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| | <p>abuse investigations during the review period. The level of care appeared to be consistent with the community level of care.</p> <p>f) Medical Staff Interview - the medical staff interviewed said that testing for STI's would be completed at a forensic examination. If the inmate victim refused the forensic exam, the facility medical staff could offer and conduct a test for STI's.</p> <p>g) CoreCivic SCC policy 13-79 states "Treatment services shall be provided to all victims of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident." The policy reflects the requirements of this provision of the standard.</p> <p>Inmates that reported Sexual Abuse - inmates that reported sexual abuse said they were offered mental health and medical services. The offer wasn't contingent upon their cooperation. They refused services, therefore they were not charged.</p> <p>h) Mental Health Interview - The Mental Health Staff said If there is a substantiated incident of inmate sexual abuse, the inmate perpetrator is referred to mental health for services. He can offer therapy to identify triggers for the behavior.</p> <p>There were no substantiated investigations of inmate sexual abuse during the review period, therefore there were not referrals to review.</p> <p>The facility meets the provisions of this standard based on the information from interviews, policies and documents reviewed.</p> |
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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-2 states "The Warden/Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded."</p> <p>b) CoreCivic SCC policy 14-2 states "Sexual Abuse Incident reviews review shall occur within 30 days of the conclusion of the investigation."</p> <p>c) CoreCivic SCC policy 14-2 states "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."</p> <p>d) CoreCivic SCC policy 14-2 states "All findings and recommendations for improvement will be documented on the 14-2F Sexual Abuse or Assault Incident Review Report or required equivalent contracting agency form. Completed 14-2F</p> |

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| | <p>forms will be forwarded to the Warden/Facility Administrator, the PREA Compliance Manager, and the FSC PREA Compliance Coordinator/designee.</p> <p>e) CoreCivic SCC policy 14-2 states “The facility shall implement the recommendations for improvement or shall document reasons for not doing so.”</p> <p>Document Review – 11 incident reviews were provided for review. All incidents of sexual abuse that were not unfounded were reviewed as required and documented on a Sexual Abuse or Assault Incident Review Report. Three were just outside of 30 days, but most were ordinarily within 30 days of the investigation’s conclusion. Reviews were conducted for some incidents of sexual harassment as well.</p> <p>Interview – A Staff that was a member of the incident review team was interviewed. He is the Security Chief. He said the team consists of the PCM, Investigator, medical staff, mental health staff and himself. They review all evidence for the case. This may include the review of video in addition to the review of the investigation report and accompanying documents. They may ask staff that were involved to attend the review. They also look at the mental health referral, offer or use of victim advocate and the retaliation monitoring that may be ongoing.</p> <p>Based on the Interviews, policies and documents reviewed, the facility meets all provisions of this standard.</p> |
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| 115.87 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-2 states “CoreCivic shall collect accurate and uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.” The date is to be entered into the IRD incident reporting system.</p> <p>b-c) CoreCivic SCC policy 14-2 states “The incident-based sexual abuse data shall be aggregated annually and shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice.”</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The annual reports compared the current year’s data to previous years. The Survey of Sexual Victimization was provided for 2022.</p> <p>d) CoreCivic SCC policy 14-2 states “CoreCivic shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.”</p> <p>f) CoreCivic SCC policy 14-2 states “Upon request, CoreCivic shall provide all</p> |

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| | <p>such data from the previous calendar year to the Department of Justice no later than June 30th or at a date requested by that Department.”</p> <p>Document Review – The Survey of Sexual Victimization was completed for SCC for 2022.</p> <p>Based on the Interviews, policies and documents reviewed, the facility meets all provisions of this standard.</p> |
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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-2 states “The FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, to include Identifying problem areas and taking corrective action on an ongoing basis.”</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The reports include information about identified problem areas and corrective actions.</p> <p>Interviews – The CoreCivic Vice President said PREA data is reviewed on a regular basis and compiled in an annual report. He reviews and approves the annual report. The PREA Coordinator said he gathers PREA data from the facilities and combines it in an annual CoreCivic PREA Report that is posted on the CoreCivic website. The PREA Compliance Manager at SCC said the PREA incident data is entered into the Incident Reporting Database. All incident reviews are sent to the CoreCivic PREA Coordinator for review. Information for the PREA annual report can be gathered from the IRD and incident reviews.</p> <p>b) CoreCivic SCC policy 14-2 states “CoreCivic will prepare an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. Such report shall include a comparison of the current year’s aggregated data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.”</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The annual reports compared the current year’s data to previous years.</p> <p>c) CoreCivic SCC policy 14-2 states “The CoreCivic Annual report shall be approved by the company Chief Corrections Officer and made available to the public through the CoreCivic website.”</p> |

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| | <p>Interview - The CoreCivic Vice President said PREA data is reviewed on a regular basis and compiled in an annual report. He reviews and approves the annual report.</p> <p>Document Review - The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The reports were signed by the Vice President.</p> <p>d) CoreCivic SCC policy 14-2 states "Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated."</p> <p>Interview - The PREA Coordinator said the annual report does not include the identity or personal and medical information for inmates or staff.</p> <p>Based on the Interviews, policies and documents reviewed, the facility meets all provisions of this standard.</p> |
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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a) CoreCivic SCC policy 14-2 states "All case records associated with claims of sexual abuse, including incident reports, investigative reports, inmate/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."</p> <p>PREA Coordinator Interview - The PREA Coordinator said files and information from investigations are retained in the IRD Incident Report Database. The IRD is a secure database with limited access to authorized staff.</p> <p>Tour Observations - All hardcopy files are in a locked filing cabinet in a locked office of the PCM or Investigator. These were observed on the facility tour.</p> <p>b) CoreCivic SCC policy 14-2 states "The CoreCivic Annual report shall be approved by the company Chief Corrections Officer and made available to the public through the CoreCivic website."</p> <p>Document Review - The CoreCivic Annual PREA Report for 2020, 2021 and 2022 were provided for review. These reports were found on the CoreCivic website at https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea.</p> <p>c) CoreCivic SCC policy 14-2 states "Before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers."</p> <p>Document Review - The CoreCivic Annual PREA Report for 2020, 2021 and 2022 were provided for review. No personal identifiers were found on the reports.</p> |

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| | <p>d) CoreCivic SCC policy 14-2 states “The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.”</p> <p>A review of the CoreCivic webpage https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea found PREA Annual Reports going back ten years to 2013.</p> <p>Based on the Interviews, policies and documents reviewed, the facility meets all provisions of this standard.</p> |
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| 115.401 | Frequency and scope of audits |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>a-b) PREA Coordinator Interview - The PREA Coordinator was asked how does the 1/3 per year audit requirement apply to CoreCivic as an agency? He said as a private company, CoreCivic is not required to submit a 1/3 Governor's certification to the DOJ. Currently CoreCivic operates and manages twenty-seven (27) facilities with all or part of the inmate population under DOJ PREA Standards. Of these twenty (27), sixteen (16) are under the operational control of state partner agencies (TN, GA, MT, AZ, OH ,CO, FLA, KY). These state DOCs set the cycle years, audit dates, and include the facilities as part of their 1/3 for the Governor's Certification. That leaves eleven (11) facilities that are truly under our operational control at the start of each Cycle Year. These are all of our USMS facilities and a couple of stand-alone facilities like Citrus (jail and Florida) and Saguaro with multiple populations. Of those eleven (11) in Cycle 4 Year 1 we audited three (3). Four(4) are set to be audited in Cycle 4 Year 2) and another four (4) in Cycle 4 Year 3. If you want to look at it strictly from a 1/3 out of the total twenty-seven (27) eligible then we meet the Standard as well. We had nine (9) out of twenty-eight (28) facilities audited in Cycle 4 Year 1. For Cycle 2 Year 2, ten (10) out of twenty-seven (27) facilities are scheduled for Audit and for Cycle 4 Year 3, eight (8) out of twenty-seven (27) are scheduled for Audit.</p> <p>We do not count our ICE facilities in our 1/3 since the DHS Standards do not have that requirement and ICE and ICE sets the dates based on their own Cycle years. We occasionally miss the 1/3 mark because of decisions beyond our control. For example, in this current cycle year we had to take Davis in Oklahoma off the schedule because Oklahoma decided to lease the facility and operate it themselves. In the previous Cycle we had to take McRae in Georgia off the schedule after the BOP pulled out due to the non-renewal of the contract. The facility was closed.</p> |

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| | <p>Community Corrections are figured the same way. We have a total of twenty (21) community corrections facilities. Twelve (12) are under CoreCivic operational control and the remaining nine (9) are under a state DOC control and they set the audit dates and count them in their 1/3. If you look strictly at the total number we hit the 1/3 mark in Cycle 4 Year 1 and audited seven (7) out of the twenty-one (21). In Cycle 4 Year 2, six (6) facilities are scheduled to be audited out of twenty-one (21) and eight (8) out of twenty-one in Cycle 4 Year 3. Because of the state control we have a harder time hitting a 1/3 of the ones do have control over in setting the cycle year. The 1/3 number is only four (4). Some of the facilities are smaller and we try to combine the audit visits, so they are back by the same auditor. TDCJ controls five (5) facilities and sets the audits dates all in Years 2 and 3. Those factors can cause the schedule to be unbalanced.</p> <p>h) This auditor was allowed access to all areas of the facility during the facility tour.</p> <p>i) This auditor was provided with all documents requested, either electronic or hard copy.</p> <p>m) This auditor was allowed to interview inmates in a private area during the onsite audit.</p> <p>n) Inmates were allowed to send confidential correspondence to this auditor. Four letters were received prior to the onsite audit.</p> |
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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | A review of the Saguaro Correctional Center website found PREA audit reports for the last three audit cycles for this facility at https://www.corecivic.com/facilities/saguaro-correctional-center . |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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| | response to an incident of sexual abuse? | |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | no |
| 115.67 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |
| 115.67 (c) | Agency protection against retaliation | |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

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