

PREA Facility Audit Report: Final

Name of Facility: Southern New Mexico Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/30/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Sharon Ray Shaver	Date of Signature: 10/30/ 2023

AUDITOR INFORMATION	
Auditor name:	Shaver, Sharon
Email:	sharonrshaver@gmail.com
Start Date of On-Site Audit:	10/02/2023
End Date of On-Site Audit:	10/04/2023

FACILITY INFORMATION	
Facility name:	Southern New Mexico Correctional Facility
Facility physical address:	1983 Joe R. Silva Boulevard, Las Cruces, New Mexico - 88004
Facility mailing address:	P.O.Box 639, Las Cruces , New Mexico - 88004

Primary Contact	
Name:	Theresa Silva
Email Address:	theresa.silva@cd.nm.gov
Telephone Number:	5755323303

Warden/Jail Administrator/Sheriff/Director	
Name:	Ronald Martinez
Email Address:	ronald.martinez@cd.nm.gov
Telephone Number:	575202826

Facility PREA Compliance Manager	
Name:	Theresa Silva
Email Address:	theresa.silva@cd.nm.gov
Telephone Number:	O: 505-629-9035

Facility Health Service Administrator On-site	
Name:	Davvid Saavedra
Email Address:	david.saavedra@wexfordhealth.com
Telephone Number:	915443-2868

Facility Characteristics	
Designed facility capacity:	768
Current population of facility:	668
Average daily population for the past 12 months:	0
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:	18 & up
Facility security levels/inmate custody levels:	2,3,4
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	250
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	7
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	27

AGENCY INFORMATION

Name of agency:	New Mexico Corrections Department
Governing authority or parent agency (if applicable):	
Physical Address:	4337 State Highway 14, Santa Fe, New Mexico - 87508
Mailing Address:	P.O. Box 277116, Santa Fe, New Mexico - 87502-0116
Telephone number:	5058278767

Agency Chief Executive Officer Information:

Name:	Alisha Tafoya Lucero
Email Address:	Alisha.tafoyalucero@state.nm.us
Telephone Number:	575-827-8884

Agency-Wide PREA Coordinator Information

Name:	Rachel Muniz	Email Address:	rachel.muniz@cd.nm.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

16

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.12 - Contracting with other entities for the confinement of inmates
- 115.13 - Supervision and monitoring
- 115.16 - Inmates with disabilities and inmates who are limited English proficient
- 115.21 - Evidence protocol and forensic medical examinations
- 115.31 - Employee training
- 115.34 - Specialized training: Investigations
- 115.41 - Screening for risk of victimization and abusiveness
- 115.42 - Use of screening information
- 115.53 - Inmate access to outside confidential support services
- 115.65 - Coordinated response

	<ul style="list-style-type: none"> • 115.71 - Criminal and administrative agency investigations • 115.81 - Medical and mental health screenings; history of sexual abuse • 115.86 - Sexual abuse incident reviews • 115.87 - Data collection • 115.403 - Audit contents and findings
Number of standards met:	
29	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-10-02
2. End date of the onsite portion of the audit:	2023-10-04

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	La Pinon Sexual Assault Recover Serv. Sorenson Holdings, LLC

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	768
15. Average daily population for the past 12 months:	646
16. Number of inmate/resident/detainee housing units:	36
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	712
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:	12
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:	4
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:	4
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:	3
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:	5
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:	18

<p>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:</p>	<p>11</p>
<p>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:</p>	<p>3</p>
<p>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:</p>	<p>42</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>250</p>
<p>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:</p>	<p>27</p>

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:	25
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:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	21
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor selected all targeted interviewees first and then identified their housing units. Once the number of individuals already selected were categorized by their housing units, then the auditor selected the remaining random individuals from each of the housing units according to factors such as age, race, ethnicity, length of time in the facility, programming, and work assignments to ensure a balanced representative number of interviewees from each of the living units.</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>The auditor's interviews with inmates were based on guidance from the PREA Auditor Handbook and the PREA Compliance Audit Instrument, Interview Guide for Inmates. All interviews were conducted privately to ensure the individuals felt comfortable expressing concerns without prison staff being present. Interviews were conducted on all days of the site visit. The auditor met no barriers to completing interviews or ensuring representation of the population.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>22</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<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>2</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>3</p>
<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 checked="" 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>The facility indicated there were no inmates who met this targeted category criteria, which was also confirmed during interviews with key staff. In addition, the auditor spent time at the facility observing individuals during recreation, programming, work, and meals and observed nothing that would indicate otherwise.</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:	2
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:	2
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:	4
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:	2
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:	6
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:	0

<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>The facility indicated there were no inmates who met this targeted category criteria, which was also confirmed during interviews with key staff. In addition, the auditor spent time at the facility observing individuals during recreation, programming, work, and meals and observed nothing that would indicate otherwise.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The auditor oversampled from the targeted categories of inmates who reported sexual abuse and those who disclosed prior abuse during the risk screening to compensate for targeted categories where no individuals met the criteria. There were no individuals for the targeted categories of youthful offenders, or deaf or hard of hearing. The Auditor experienced no barriers to completing interviews and all participated willingly.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>22</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>42</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

	<input type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Chaplain; Volunteer Coordinator; Disciplinary Hearing Officer; Grievance Officer; Camera Maintenance Technician; Mailroom Clerk.
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:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input 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:	4
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 checked="" type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

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

Site Review

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

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

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
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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
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87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

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).

The Southern New Mexico Correctional Facility (SNMCF) is located 12 miles west of the city of Las Cruces and 55 miles from El Paso, Texas. The city of Las Cruces community has a population of approximately 100,000. The facility was built on the west mesa overlooking the Mesilla valley and the Organ Mountains. This adult male facility is comprised of two sites located on approximately 59.6 acres of land. The Joe R. Silva Unit (JSU) houses level 3, 4 and Restricted Housing Unit (RHU) custody offenders. The Paul Oliver Unit (POU) houses level 2 custody offenders. The auditor conducted a thorough inspection of all buildings and areas at both the JSU and POU. The Level 3/4 Unit (JSU) was authorized by the New Mexico Legislature in 1981 and was constructed in three phases with its completion dated in 1983. There are five housing units subdivided into an A and B unit for a total of 10 units (Housing Unit 1- A and B, Housing Unit 2-A and B, Housing Unit 3-A and B, Housing 4A and B, Housing 5A and B). Each A and B unit is further divided into three pods, housing 16 offenders in each, for a maximum capacity of 43 in each sub-unit and 96 offenders total per housing unit. All cells at the JSU are individual cells providing 88 square feet per cell with an integrated toilet/sink. The total populated unit capacity is 480 single cells and 48 confinement cells (RHU). Total facility capacity is 788. Offender movement in and out of each housing unit is controlled by a master control center unit which is manned 24 hours per day, seven days a week for supervision and movement of offenders in and out of their cells. The units are under the supervision of a unit management team and mental health professional located on the units. Education, medical, mental health and religious services are brought to the offenders according to their security level. Offenders on the unit have recreation in recreation yards either by themselves or in limited small groups for exercise and sunlight. Construction of the

POU, was completed in July 1996 and received its first offenders in August 1996. This is a stand-alone building located outside of the JSU complex. The housing is 1720 square feet of dormitory style structure, which is divided into two units (A Side and B Side). Each unit is further divided into three dormitories housing 48 offenders in each unit for a total of 144 per housing unit. POU showers/toilets/washbasins are provided at a ratio of 1:12. The facility has a designed capacity of 300. The unit management staff has office space on the unit for accessibility by the offender population. Each pod has three wall-mounted phones, a water fountain and an adjunct dayroom/television area with sitting space. The food service, dining room area, education, library, and visitation are all located within the complex. Offender movement is controlled by a central control center which is manned 24 hours a day. There is a total of 20 buildings (JSU) which are maintained on the inside of the perimeter, ten of which are housing units. Buildings 1 and 2 consist of the facility commissary operations. Building 3 houses the facility automotive technology/welding programs, Building 4 maintains the facility emergency sandbagging and personal protection equipment operations. There are a total of three buildings which are maintained on the outside of the perimeter. There are three buildings across the compound that include level 2 housing unit (POU), TC modular and Property ID building in a separate perimeter. Buildings maintained on the outside of the perimeter are all secured and stand alone. There is a total of three-armed security perimeter vehicles. Two are continuously rotating in service with the remaining third used as a "backup". There are two security towers which provide 24-hour, 7-day per week outer perimeter security coverage. At the time of this audit only one tower was in operation. SNMCF complex maintains one helicopter pad. The perimeter of the facility is surrounded by two fences with rolls of razor

ribbon wire at the bottom, the center, and at the top of the outer chain link fence. There are two fences, twelve ft high, which are approximately twenty ft apart. Its inner fence consists of a "no climb" mesh covering, and its outer fence consists of a non-lethal electrified "stun fence". A microwave movement detection system is installed between the inner and outer fences. There is one controlled security "traffic" station located at the facility's entrance monitoring all traffic entering and exiting the facility. High Pressure Sodium lighting fixtures provide ample lighting to the facilities perimeter. These security provisions provide 24-hour/7 day per week surveillance throughout the entire facility. The Administration building serves as the facilities main entrance and pedestrian gate through which staff, contractors, and visitors enter. One is located at JSU, the second is located at POU. The "outer" Sally port serves as a third point of egress and services all truck traffic. There is a fourth point of egress that specifically services food service truck traffic. Offenders arrive to the SNMCF from the Reception and Diagnostic Center at Central New Mexico Correctional Facility. This facility is located in Los Lunas, New Mexico. Before offenders are transferred to SNMCF, they will have gone through an initial screening by Classification, Security Threat Intelligence Unit (STIU), Behavioral Health, Medical, etc. to determine proper custody level and facility assignment. Upon arrival at SNMCF, the offender will be housed in the assigned unit under Orientation status. This status is to ensure the inmate is placed in the proper housing assignment. An Orientation TAP Committee assessment will be completed on or before 7 days of the offender's arrival at the facility. This assessment will be held with a disciplinary team which consists of: Committee Chairperson (Unit Manager), Classification Officer, Education, Behavioral Health, Medical and Security. During this committee assessment, recommendations will be made

as to the offender education and employment, to ensure he will be assigned to the proper education or work assignments. This will be obtained from information obtained from the Committee members and assessments. Additional departmental space provided includes: Intake processing, mental and medical health services, indoor and outdoor recreation, religious services, academic and social services programming, food preparation and dining, commissary services, maintenance, laundry and library services, visitation, mailroom, security, administrative, and other related supportive services. The auditor completed a test call from a phone from a randomly selected dormitory and received notification from the Inspector General's office that it was received within two hours.

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.).

All requests for documentation were responded to promptly and comprehensively. Additional correspondence occurred between the auditor, the PCM and the PREA Coordinator, up to the onsite portion of the audit and then after until the issuance of the final report. Interviews with the PREA Coordinator, Inspector General, and the Agency Head confirmed no consent decrees or oversight exists. The auditor reviewed relevant documents provided by the facility and on the agency website, in addition to the Pre-Audit Questionnaire (PAQ) and supporting documents. Using the PREA Compliance Audit Instrument and the Checklist of Documents during the review of the PAQ, a list was prepared for review during the onsite portion of the audit. Other documents reviewed for compliance determination are referenced in the narrative sections under each individual standard discussion. Throughout the audit, an extensive document review was conducted, and various policies, forms, contracts, and additional working documents were reviewed, evaluated, and triangulated against information obtained from interviews and personal observations during the site visit, which were instrumental in determining agency and facility compliance with the PREA standards. Included below is the list of governing New Mexico Corrections Department (NMCD) policies that were provided for compliance determination and will be referenced throughout the audit report, annotated throughout the report using only the policy number. This list is not intended to be exhaustive but outlines the core policy documents used in the evaluation process. Information obtained from these policies combined with the information provided with the PAQ and the observations, facility documentation, and general information collected from the site visit was carefully evaluated and assessed against each of the elements of the standards. Additionally, the NMCD publishes its agency policies on its public website.

(OPS) Administrative/Internal Affairs
Investigators Completion Certificates

(OPS) Administrative/Internal Affairs
Investigators Curricula

Allegation Notifications Warden-to-Warden

Annual Report - 2022 and verification of
website posting

Brochures - Ending Silence - "Don't Touch
Me" and "I Reported"

Camera Layout Map

CD-030200 Recruitment, Selection, and
Hire of Correctional Officers, Correctional
Officer Specialists and Probation and Parole
Officers

CD-031800 Office of Professional Standards
(OPS), Personnel Investigations and Staff
Misconduct Reporting

CD-032200 - Code of Ethics

CD-037800 - Disciplinary Action for
Employees

CD-041000 - Inmate Orientation

CD-060200 - Citizen Involvement and
Volunteers

CD-090100 - Inmate Discipline

CD-130300 - Search Policy

CD-141100 - Protective Custody

CD-141500 - Restrictive Housing

CD-150100 - Offender Protection Against
Abuse; Sexual Misconduct; Reporting
Procedures; PREA

CD-150300 - Access to Telephones,
Telephone Monitoring, Attorney Phone
Calls

CD-150800 - Transgender, Intersex, and/or Gender Non-Conforming

CD-151200 - Correspondence Regulations

CD-170100 - Medical Clinical Services, Psychiatry Services, Detoxification, Intoxication and Withdrawal

CD-176100 - Patient Rights and Responsibilities

CD-180100 - Behavioral Health Clinical Services

CD-180200 - Behavioral Health Reception and Diagnosis Center

Completed Contractor and Volunteer Training Acknowledgements

Contract - Confinement of Inmates Lea County

Contract - Confinement of Inmates Otero County

Facility Staffing Plan - SNMCF

Facility Staffing Plan Deviations Memo - Last 12 months

Facility Staffing Plan Review - 09/11/23

Hotline Test Call Verification

Inmate Orientation Checklist (includes Sexual Abuse / Assault / PREA video)

Inmate PREA Education Acknowledgement Form

Intake Pamphlet - Victim Services Instructions

Interpreter Service Agreement with: Sorenson Interpretive Services LLC

Investigation Case Files

Investigation Process on Website

Investigations Summary Spreadsheet

Language Line Contract

Language Line ID Poster

Language Line Quick Reference Instructions

List of Incident Review Team Members

Logs: Opposite Gender Searches and Inspections

Training: Medical & MH Specialized training certificates and education packets

Memo - Department of Public Safety PREA Coordinator verification of Police Academy Training Curricula

Memo: TTY/ASL & Staff Interpreters/ Language Line

MOU - Outside Reporting b/t NM Corrections and Colorado Corrections Departments

MOU - The American Federation of State, County and Municipal and State of New Mexico

MOU: SNMCF and La Pinon Sexual Assault Recovery Services

NCIC / Background Clearance Form

New Mexico Corrections Department SANE/SAFE Protocols

New Mexico Department of Public Safety Training Topics

NMCD - Rights to Confidentiality and Availability of Services

Non-population memo: Female Inmates

Non-population memo: Youthful / Juvenile

Inmates

On-Site Tour Route

Opposite Gender Stop Sign &
Announcement

OPR:39 - Department of Public Safety (DPS)
Policies & Procedures - Criminal
Investigations

OPR:40 - DPS Policies & Procedures - Crime
Scenes

Organizational Chart - Facility - SNMCF

Organizational Chart - NM Department of
Corrections

PCM Appointment Letter

PCM Job Description

PCM Resume

PREA Audit Schedule - 3yr projection

PREA Coordinator Resume

PREA Education Pamphlet for Staff

PREA Handbook - English & Spanish

PREA Posters - English & Spanish

PREA Posters - Printed and Painted - English
and Spanish

PREA Screening Report Blank Sample

Propio - "One Moment Please" Tool

Retaliation Monitoring - Completed sample
of 30-60-90 days

Retaliation Monitoring - Staff Retaliation

Sample Hiring Packet: PREA Questionnaire;
Sex Abuse Self-Declaration; PREA Previous
Employment; PREA Training

Acknowledgement

Screening - Completed "25-day" Victim Screenings

Screening - Completed "48" hour victim screenings

Screening - Completed 6-month transgender reassessments

Screening - Counseling Referral for history of sexual perpetration

Screening - Counseling Referral for history of sexual victimization

Screenings: Initial and Rescreen Signed Acknowledgements

Sexual Abuse Incident Review Team Form (CD-150102.3)

Sexual Abuse Incident Team - Completed SIR

Sexual Abuse Responder Pocket Cards

SNMCF Alpha Roster

SNMCF Coordinated Response Guide

SNMCF Facility Step Down Plan

SNMCF Housing Report

SNMCF List of Disabled Inmates

SNMCF List of inmates that reported prior SA

SNMCF List of LEP Inmates

SNMCF List of LGBTI inmates

SNMCF List of SA reported at facility

SNMCF PREA Lesson Plan (Contractor/ Volunteer)

SNMCF Restrictive Housing Roster

SNMCF Training Schedule

Staff Self-Declaration of Misconduct Forms

Strip-Search Logs

Third Party Reporting Visitor Brochure

Third Party Reporting Website

Training - Investigating SA in Confinement Setting and (Advanced) Certificate

Training Curricula: Office of Professional Standards (OPS) Investigation Training Modules (Student Guides)

Training Curricula: Prison Rape Elimination Act-New Employee and Annual In-Service Training- 2022

Training: Contractor and Volunteer PREA Curricula

Training: Corrections 101 Agenda and PREA Training Curricula

Training: Initial and Refresher Inmate PREA Training Signed Acknowledgements

Training: Staff PREA Training Curricula

Training: Staff and Contractor Acknowledgement Forms

Transgender Initiatives/Plan

Unannounced Rounds logs

Website Verification of Annual Reports

Website Verification of Facility Audit Reports

Working with an Interpreter Instruction Sheet

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	1	0	0	1
Staff-on-inmate sexual abuse	2	0	2	0
Total	3	0	2	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	4	0	4	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	1	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	1	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	0	1	0
Staff-on-inmate sexual abuse	0	2	0	0
Total	0	2	1	0

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
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	1	1	0
Staff-on-inmate sexual harassment	0	2	0	0
Total	0	3	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

3

<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>1</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>2</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>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative 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>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</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>2</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	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
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.	Investigative files were well organized and documented a thorough and unbiased investigation.
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

<p>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.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>American Correctional Association</p>
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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>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed: CD-150100 Offender Protection Against Abuse; Sexual Misconduct; Reporting Procedures; PREA; CD-150800 Transgender, Intersex, and/or Gender Non-Conforming; Organizational Chart - NM Department of Corrections; PREA Coordinator Resume: Rachel Muniz; PCM Appointment Letter: Theresa Silva; SNMCF Facility Organizational Chart; PCM Job Description; PCM Resume; Observations During Site Visit; Information Obtained from Interviews.</p> <p>115.11(a): The New Mexico Corrections Department (NMCD) has a written policy, CD-150100, Offender Protection Against Abuse; Sexual Misconduct; Reporting Procedures; PREA that mandates zero tolerance toward all forms of sexual abuse and sexual harassment and outlines how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. This policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment, sanctions for those found to have participated in prohibited behaviors, and a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of offenders.</p>

	<p>115.11(b): A review of the NMCD Organizational Chart positions the PREA Coordinator as a direct report to the Inspector General who reports to the Deputy Secretary. The incumbent PREA Coordinator was appointed as the interim ACA/PREA Compliance Bureau Chief on November 16, 2022, according to an agency-wide announcement sent electronically from the Director of Adult Prisons Division. Based on an interview with the agency's PREA Coordinator she explained that she has enough time to manage her PREA-related responsibilities due in part to the fact that the agency has designated PCMs at each of the 10 facilities. She interacts with each of them individually and collectively on a regular basis concerning training, allegations, and audits. If she identifies an issue with a facility complying with a PREA standard, she will research best practices from other agencies and then issue an executive summary report to the Director of Adult Prisons and to the Warden at that facility. She then imposes a twelve-week corrective action period for the facility to show compliance. Each PCM is required to audit PREA every month at their facility and submit the audit to the agency's PREA Coordinator where it is reviewed. This internal audit process and frequency is above and beyond the requirement of this standard.</p> <p>115.11(c): The PCM was appointed to this position on February 10, 2022, according to a Memorandum issued by the agency's PREA Coordinator. A review of the SNMCF Organization Chart positions the PCM as a direct report to the Warden. An interview with the facility PCM determined that she has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. Her responsibilities include regular monitoring and auditing of the intake process, tracking all allegations, ensuring that proper signage is available, and becoming familiar with all potential victims, predators and members of the LGBTQI community housed at the facility. She is also responsible for assisting and being part of the advocate process for victims or potential victims. Additionally, the PCM is a trained sexual abuse investigator. These responsibilities go above and beyond the compliance requirements of this standard and are found to exceed requirements of this standard.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance and exceeded the provisions of this standard</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed: Lea County New Mexico Contract; Otero County Prison Facility Contract; Website Review; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.12(a): The agency has entered into or renewed (2) contracts for the confinement of inmates (Lea County New Mexico and Otero County Prison Facility) since the last PREA audit. A review of the contracts verified that the entities are obligated to adopt</p>

	<p>and comply with the PREA standards.</p> <p>115.12(b): The NMCD employs full-time contract monitors that are assigned to and work onsite at the contract facilities. These contract monitors are required to complete weekly and monthly PREA audits; the facilities are also required to be audited every three years by a certified PREA auditor, in accordance with 115.401. The auditor reviewed samples of the most recent completed PREA Audit Tool for Otero County Prison Facility and prior PREA final audit reports during a web search. Full-time contract monitors assigned to each facility is above and beyond the requirements of this standard.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency has demonstrated compliance with all provisions of this standard. The agency is found to exceed the requirements of this standard by employing onsite full-time contract monitors.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence: Policy CD-150100; Facility Staffing Plan - SNMCF; Facility Staffing Plan Review - 09/11/23; Facility Staffing Plan Deviations Memo - Last 12 months; SNMCF Facility Step Down Plan; Opposite Gender Stop Sign & Announcement; Unannounced Rounds logs (48); Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.13(a): The agency policy CD-150100 requires each facility to develop, document, and make best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining a need for video monitoring, facilities must take into consideration generally accepted detention and correctional practices; any judicial findings of inadequacy; any finding of inadequacy from Federal Investigative agencies; any findings of inadequacy from internal and external oversight bodies; all components of the facility’s physical plant (including blind spots); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or Local laws, regulations or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and, any other relevant factors. The staffing plan was predicated on 1074 and the average daily population is 1068. A review of the 2023 staffing plan determined that the facility meets all criteria required for this provision.</p> <p>115.13(b): In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan. Based on interviews with the PCM each deviation is documented on incident reports. The Auditor reviewed</p>

documentation from the Chief of Security that documented deviations from the staffing plan. Additionally, the auditor randomly selected Administrative Shift Reports for review which also provides documented post closures. The most common reasons for the deviations included facility disturbances, inmate-to-inmate physical assaults and a power outage. Anytime adjustments are made to staffing, notifications are made to the Major, Duty Officer, Deputy Warden, and Warden. Staffing levels are also monitored by the assigned Duty Officer weekly during their rounds.

115.13(c): Policy CD-150100 requires that at least one time per year, the facility will hold a meeting to assess, determine and document whether adjustments are needed to the staffing plan, the facility's deployments of video monitoring systems and other monitoring technologies; and the resources the facility has available to commit to ensure adherence to the staffing plan. At the conclusion of the meeting, documentation of the review is forwarded to the agency PREA Coordinator for review. The most recent staffing plan covers the period from June 2022 to June 2023 and the last review was conducted September, 2023, there were no recommendations for changes made during the last review.

115.13(d): Policy CD-150100 establishes that inmates shall be protected from sexual misconduct, personal abuse, corporal or unusual punishment, humiliation, mental abuse, personal injury, disease, property damage, harassment, or punitive interference with the daily functions of living, such as eating and sleeping. Shift supervisors make unannounced rounds in housing units to deter staff sexual abuse and sexual harassment. Staff members are prohibited from alerting other staff members that supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility. The rounds are documented in the pass downs or in the control logbooks. The facility provided several samples of unit logs, as well as multiple duty officer reports that specifically address unannounced rounds with the PAQ. Additionally, the auditor reviewed the onsite logs during the site visit for more recent documenting of these rounds and found them well documented. The auditor requested four randomly selected dates for Duty Officer Reports for review and found detailed and comprehensive information of the rounds conducted by higher level staff during their tour of duty. The auditor requested additional documentation of shift reports, and staff visit logs to assess the consistency of these rounds. The facility's documentation of unannounced rounds indicates they are made frequently, regularly, and consistently. Based on the thorough and multiple methods of documenting these unannounced PREA rounds, the facility exceeds this provision.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. Additionally, based on the thorough documentation verifying that unannounced PREA rounds are routinely conducted, the facility exceeds provision (d) of this standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; Non-Population Memo to Auditor Youthful Inmates; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.14(a)(b)(c): Policy CD-150100 establishes that inmates under the age of eighteen years old will not be assigned to housing in the same housing unit as adult inmates but will be housed in the Youthful Inmates Management Unit at Northeast New Mexico Facility. Inmates under the age of eighteen (18) will have direct sight/sound contact with staff in areas outside of the housing unit. The PCM provided a listing of inmates by age confirming there were no youthful inmates at the facility on the first day of the audit, nor within the audit period; this facility does not house youthful offenders.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-150800; Strip Search Logs; Staff Training Records; Searches Training Curriculum; Lesson Plan; PowerPoint; Non-population Memo re: Female Inmates; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.15(a): CD-150100 establishes that staff members shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches. In the event that these types of searches should occur, an SIR shall be generated documenting the need for the search. The auditor reviewed (107) pages of strip-search logs that confirmed strip searches are documented and only conducted by same gender staff. The auditor completed a tour of the complete facility and observed areas used to conduct strip searches, including camera views. All areas were sufficiently blocked to mitigate opposite gender viewing. If cameras were present in the area, the facility had placed marks on the floor indicating where the inmate was to stand to be out of camera view.</p> <p>115.15(b)(c): This facility houses male inmates; therefore, the facility is exempt from provisions (b) and (c) of this standard.</p> <p>115.15(d): CD-150100 states that inmates shall be afforded the opportunity to shower, perform bodily functions, and change clothing without non-medical 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. Staff</p>

members of the opposite sex of the inmate population in their facility must announce their presence when entering an inmate housing unit. The facility provided photographs with "Opposite gender must announce presence" painted above the entry doors of the housing units. Additionally, the Auditor observed these notices during the facility tour. These announcements must be logged into the housing unit daily log for that unit. The auditor completed a tour of the complete facility and observed areas where inmates may be in a state of undress, such as shower, using the toilet, and changing their clothes. The auditor found no areas that allowed for opposite gender viewing beyond viewing incidental to cell checks. All areas provided sufficient privacy to mitigate opposite gender viewing. If cameras were present in the area, the facility pixilated or blacked out where no viewing via camera could occur. In cells where inmates are placed on constant observation monitoring, same-gender staff are assigned to these duties.

115.15(e): CD-150100 and CD-150800 establish that transgender and intersex inmates shall not be searched or examined by non-medical staff for the sole purpose of determining the inmate's genital status. Genital status shall be determined by interviews or medical records reviews. A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. The facility indicates that no searches of this nature were conducted within the last 12 months. The auditor interviewed random staff, security supervisors, and medical staff and confirmed that these types of searches have not occurred during the audit period. Four transgender inmates were interviewed who further confirmed searches to determine an individual's genital status has not occurred and that searches are conducted in a respectful and professional manner.

115.15(f): CD-150100 states that the agency shall train security staff in how to conduct cross-gender pat down searches and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The facility indicates that 244 (98%) of staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates. The Auditor reviewed the PREA training curricula which includes the required searches training. Four training records were provided by the facility with the PAQ, and the auditor additionally reviewed (18) randomly selected employee training files that all contained signed training acknowledgments indicating their understanding of the training they received.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Evidence Reviewed: CD-041000 Inmate Orientation; Training Curricula: Prison Rape Elimination Act-New Employee and Annual In-Service Training- 2022; Brochures - Ending Silence - "Don't Touch Me" and "I Reported"; PREA Posters - English & Spanish; Interpreter Service Agreement with: Sorenson Interpretive Services LLC; Language Line Contract; PREA Handbook - English & Spanish; Language Line ID Poster; Language Line Quick Reference Instructions; Propio - "One Moment Please" Tool; Working with an Interpreter Instruction Sheet; Information Obtained from Interviews; Observations During Site Visit.

115.16(a): CD-150100 establishes that inmates with disabilities shall have access to all aspects of the Department's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Form CD-150102.3 Sexual Abuse or Assault Incident Review Team ensures that any of the alleged victims or perpetrators with a disability (including a mental illness) has access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. The facility provided a list of twenty-three (12-Physical; 4-Cognitive; 4-Blind or Visually Impaired; and 3-Deaf or hard of hearing) inmates that were known to have a disability based on the answers to the screening questions. The Auditor interviewed six disabled inmates (3-cognitive, 1-blind and 2-physical disabilities). There were no deaf inmates at the facility during the on-site audit. The disabled inmates interviewed indicated that they have access to all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The agency has a contract with Sorenson Holdings, LLC for interpretation services for the deaf.

115.16(b): The agency takes 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 (LEP), including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. The facility has a contract with LanguageLine and Wexford utilizes Propio Services for communicating effectively with LEP offenders. The facility also provided information pamphlets for all of the named services above. The facility provided examples of the inmate handbook in both English and Spanish, as well as the PREA educational pamphlet in English and Spanish. The facility has three staff members who are fluent in English and Spanish and are used as translators when needed. Form CD-150102.3 Sexual Abuse or Assault Incident Review Team ensures that any of the alleged victims or perpetrators with a disability (including a mental illness) or is LEP, has access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. The facility provided a list of five LEP inmates currently housed at the facility, all Spanish speaking. The Auditor interviewed two randomly selected LEP inmates using the services of a staff interpreter. Both inmates were offered use of the Language Line Service but elected to use a staff interpreter. The LEP inmates interviewed indicated that they have access to all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment and were

	<p>provided information in a language of their understanding during intake.</p> <p>115.16(c): CD-150100 states that the agency shall not use inmate interpreters to assist disabled or LEP inmates in participating in efforts to prevent, detect, and respond to sexual abuse and sexual harassment, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responders, or investigation of the inmate's allegations, is prohibited. The facility indicates that there were no instances where an inmate interpreter was used. The auditor's review of the investigative files indicated that either staff interpreters or the Language Line were used when the party being interviewed was LEP.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. Additionally, the facility exceeds this standard by providing multiple methods for communicating with inmates with special needs.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed: CD-150100; CD-037400; CD-030200; CD-032200; Personnel Files; PREA Acknowledgments; Self-Declaration/PREA Misconduct Questionnaire; Contractor/Volunteer Background Consent Forms/Clearance; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.17(a)(b)(f): CD-037400 establishes that applicants and contractor applicants who have 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); or have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or; have been civilly or administratively adjudicated to have engaged in the activity described above, shall not be hired or promoted. Incidents of sexual harassment shall be considered in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The auditor reviewed (18) employee files that contained a signed PREA Questionnaire and the NCIC background check was conducted.</p> <p>115.17(c)(e): Before hiring new employees who may have contact with inmates, the agency performs a criminal background records check, and 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. The agency conducts criminal background records checks at least every five years of current employees</p>

and contractors who may have contact with inmates or have in place a system for capturing such information for current employees. The interview with the HR Director confirmed that employers are contacted to discover information on substantiated allegations of sexual abuse or departures during an investigation for applicants who worked in an institutional setting prior. There were (6) employees that have been employed longer than 5 years and five-year background checks were completed and current. During the onsite visit the facility completed the remaining employee's 5-year background check. The auditor observed a spreadsheet maintained on a shared drive for the HR Manager and PCM to monitor for employee backgrounds, training, and other document requirements.

115.17(d): CD-030200 states all selection, retention and promotion shall be based on merit and specified qualifications including all personnel covered by merit systems, civil service regulations, or union contracts. In accordance with state and federal statutes, a criminal record check shall be conducted on all new employees, contract personnel, interns, and volunteers prior to assuming their duties to identify whether there are criminal convictions that have a specific relationship to job performance or delivery of services. The auditor reviewed the required background checks for (16) volunteers and (25) contractors and the PREA Questionnaire was completed prior to beginning work.

115.17(g): CD-037400 states that the agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in section J of this policy in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The policy also states that employees have a continuing affirmative duty to disclose any such misconduct. Additionally, a review of the self-declaration/PREA misconduct questionnaire found it includes a statement attestation for the continuing affirmative duty to disclose any facts that would change the results of the misconduct questions. The Auditor randomly selected and reviewed (59) (18-employee, 25-contractor and 16-volunteer) files and found that the questionnaire was completed and signed by the participant.

115.17(h): The agency/facility provides 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. An interview with the HR Director confirmed that this information will be provided upon receiving a request from the prospective employer if accompanied by signed consent of the employee.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; Camera Floor Plans; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.18(a): CD-150100 establishes that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect the inmates from sexual abuse. The agency has not acquired a new facility or has the facility made a substantial expansion or modification to the existing facility since the last PREA Audit.</p> <p>115.18(b): CD-150100 establishes that when installing or updating a video monitoring system, electronic surveillance system or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse. The facility has installed/updated a video monitoring system, electronic surveillance system, or other monitoring technology since their last PREA audit. The facility provided the auditor with camera layouts for the entire facility describing their surveillance cameras facility-wide. Interviews with the Deputy Warden, PCM, PREA Coordinator, Industry Supervisor, and the Plant Operations Supervisor the auditor determined that the facility and agency considered how this technology may enhance the agency’s ability to protect inmates from sexual abuse when making equipment selection and placement decisions. The auditor observed locations of cameras throughout the facility and found they were placed in locations to better enhance safety for the facility.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed: CD-031800 Office of Professional Standards (OPS); CD-170100 Medical Clinical Services, Psychiatry Services, Detoxification, Intoxication and Withdrawal; Personnel Investigations and Staff Misconduct Reporting; OPR:39 - Department of Public Safety (DPS) Policies & Procedures - Criminal Investigations; OPR:40 - DPS Policies & Procedures - Crime Scenes Memo; Department of Public Safety PREA Coordinator verification of Police Academy Training Curricula; Training Curricula: Office of Professional Standards (OPS) Investigation Training Modules (Student Guides); Training Curricula: Office of Professional Standards (OPS) Investigation Presentation; SNMCF Coordinated Response Guide; MOU - SNMCF and La Pinon Sexual Assault Recovery Services of Southern New Mexico (SARS) - SANE Exams and Emotional Support Services; New Mexico Corrections Department SANE/</p>

SAFE Protocols; Investigation Process on Website; Observations During Site Visit.

115.21(a): Based on an interview with the facility's trained investigator and policy review, the agency is responsible for conducting administrative investigations for both sexual harassment and sexual abuse claims. At such time that the facts indicate that a criminal act may have occurred, the Office of Professional Standards (OPS) will be notified, and the criminal investigation will be coordinated with the New Mexico Department of Public Safety State Police. The OPS observes the investigative protocols found in the DPS OPR 39, Criminal Investigations and OPR 40, Crime Scenes. Both of these policies were provided to the auditor for review and were found to outline direction that follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The auditor also reviewed a memorandum from the DPS, New Mexico Law Enforcement Academy Director outlining the training received by all New Mexico State Police officers which indicate their specialized qualification for conducting criminal investigations of sexual abuse. Because the DPS State Police is considered an outside law enforcement entity, the facility and agency are found to exceed the provisions of this standard through evidence of close collaboration with the outside entity, providing their investigative protocol policies, and officers' training information. CD-150102 establishes local protocols that cover the handling of evidence and is consistent with the requirements of the DPS OPR 39 and 40. A facility health care professional will take a history and conduct an examination to document the extent of physical injury and to determine if there are injuries that merit transfer to another medical facility. The purpose of the examination is to determine the patient's stability for transfer to a site that provides forensic examinations. Additionally, a review of the facility's Coordinated Response plan indicates that the inmate will be transported to a community health center for SANE exams. The facility indicated on the PAQ and confirmed during interviews with the PCM, HSA, and Deputy Warden that there were no forensic medical examinations (FME) performed within the audit period.

115.21(b): Review of DPS OPR 39 and 40 confirmed that the investigative protocol is developmentally appropriate for youth where applicable, and as appropriate, and is 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.

115.21(c)(d)(e): CD-150100 establishes that the Warden or designee will ensure that victims of sexual assault are promptly transferred under appropriate security provisions by Emergency Medical Services or NMCD personnel as is medically appropriate to a community health care facility for treatment and gathering of evidence at no charge to the inmate. The facility does not conduct FMEs but will transfer the inmate to an appropriate medical facility by EMS or NMCD personnel as is medically appropriate. Advocacy services will be provided through an agreement with La Pinon Sexual Assault Recovery Services. Additionally, the agency may utilize resources through the New Mexico Coalition of Sexual Assault Programs, Inc. (505-883-8020); Rape Crisis Center (505-266-7711); and Albuquerque SANE

	<p>Collaborate (505-844-7263). The Auditor reviewed the MOU between SNMCF and La Pinon Sexual Assault Recovery Services which will provide support through the FME process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.</p> <p>115.21(f)(g): Based on review of the memorandum from NM DPS, who is responsible for investigating criminal allegations of sexual abuse, the investigating agency follows the requirements of paragraphs (a) through (e) of this section.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard and exceeds provision (a).</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed: CD-150100; CD-150101; CD-150102; CD-031800; CD-031801; CD-031802; Agency Website; Investigation Case Files; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.22(a)(b)(c): CD-150100/150101 establishes that the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. CD-150102 establishes procedure that allegations of sexual abuse and sexual harassment are to be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior; and that all such referrals will be documented. CD-031800/031801 establishes specific procedures that govern personnel investigations of staff misconduct. An interview with the facility investigator confirmed that the entity with the legal authority to conduct criminal investigations is the New Mexico (NM) Department of Public Safety (DPS) State Police. The investigator further explained when the facility receives an allegation of sexual abuse or sexual harassment, (whether staff-on-inmate or inmate-on-inmate), a trained facility investigator will begin the investigation with support from the Office of Professional Standards. If and when the evidence appears to be criminal, the administrative investigation will be put on hold and the DPS State police will be contacted for a criminal investigation. The agency's investigative protocols are published on its public website at https://www.cd.nm.gov/policies/ and agency policy. There were seven allegations of sexual abuse or sexual harassment received. Administrative investigations were conducted for seven at the facility level and one was referred for criminal investigation and is still pending. The PCM confirmed that she checks in periodically with the DPS about the status of the investigation.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence: CD-150100; CD-150800; 190000; NMCD PREA Lesson Plan; SNMCF Training Department Schedule; SNMCF Hiring and Training Packets; SNMCF Staff and Contractor Acknowledgement Samples; SNMCF Self-Declaration Samples; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.31(a)(c)(d): Policy CD-150100 establishes the NMCD has a “zero tolerance” policy regarding all forms of sexual abuse, sexual misconduct, and sexual harassment. The affirmation of the zero-tolerance policy is also contained in the NMCD PREA Lesson Plan. The agency trains all employees who may have contact with incarcerated individuals on the agency's zero-tolerance policy for sexual abuse and sexual harassment. Additionally, employees are trained on how to fulfill their responsibilities, prevention, detection, reporting, and response policies and procedures, and the right of individuals to be free from sexual abuse and sexual harassment, and retaliation. The agency requires staff to be trained in PREA every year during in-service training, which is above and beyond the requirement of this standard. A review of the 2023 agenda shows that PREA is covered on day two of in-service. The auditor reviewed eighteen randomly selected personnel records and found that all received initial and annual PREA refresher training, and all had signed forms acknowledging their understanding of the training. Interviews with randomly selected staff confirmed their knowledge of the topics covered in the agency's PREA training. An interview with the training coordinator confirmed training completions are tracked on a regular basis and contact is initiated with the management staff for people who have not completed their required training by the established deadline. The training coordinator presented the auditor with an overview of how he tracks the annual training requirements on a spreadsheet to monitor for compliance.</p> <p>115.31(b): The PREA training modules NMCD PREA Lesson Plan contain individual sections regarding the dynamics of both male and female offenders, as well as a section on juvenile dynamics. An interview with the agency PREA Coordinator confirmed that all staff is trained on both male and female gender-specific information regardless of the gender of the facility that they are assigned to. An interview with PCM and training coordinator confirmed that employees who transfer in from another type of facility receive a facility-specific orientation which includes a gender refresher.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard and exceeded by requiring training annually.</p>

115.32	Volunteer and contractor training
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence: CD-150100; SNMCF PREA Lesson Plan (Contractor/Volunteer); SNMCF Training Department Schedule; PREA Education Pamphlet for Staff; Completed Training Acknowledgement Forms for (19 Contractors and 16 Volunteers); Observations during facility Tour; Information Obtained from Interviews.</p> <p>115.32(a)(b)(c): 150100 establishes that prior to contact with any inmate, any employee, volunteer and/or contractor will have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Policies 300.040 and 300.045 provide further guidance about the levels of training required based on the services being provided and the level of contact the individual has with incarcerated individuals. The auditor reviewed the PowerPoint for PREA Volunteer/Contractor/ training and found PREA is covered and includes the zero-tolerance policy, their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Additionally, they are required to read and sign an acknowledgment of their understanding of policy CD-150100 and the training received. The auditor reviewed randomly selected training records of sixteen volunteers and twenty-five contractors. Each file had a signed acknowledgement form in place. Additionally, the auditor interviewed two volunteers and three contractors. These records and interviews confirmed that the contractors and volunteers were trained on their responsibilities under the agency's policies and procedures, were notified of the agency's zero-tolerance policies regarding sexual abuse and sexual harassment and were trained on how to report these incidents.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

<p>115.33</p>	<p>Inmate education</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence: CD-150100; CD-041000; NMCF PREA Pamphlet; Inmate PREA Acknowledgement; PREA Posters (English/Spanish); SNMCF Inmate Handbook; Brochures - Ending Silence - "Don't Touch Me" and "I Reported"; Orientation Verification Checklist; Initial and Refresher Inmate PREA Education, Signed Acknowledgements; NM PREA Resource Guide for Inmates; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.33(a): CD-150100 establishes the agency will provide comprehensive education to inmates either in person regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and</p>

regarding agency policies and procedures for responding to such incidents. In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. This information shall be communicated orally and in writing, in a language clearly understood by the inmate, upon arrival at a facility. Information will be made available to inmates, as needed to include those who are Limited English Proficient, deaf, visually impaired, otherwise disabled and limited in reading skills. Within the first few hours of their arrival, new intakes are told about the zero-tolerance for sexual abuse and sexual harassment, receive the PREA brochure, and individuals signed a roster being advised of the zero-tolerance policy and receipt of the brochure. The auditor observed the PREA posters in English and Spanish throughout the facility, including the intake area. Interviews with the intake staff and medical staff confirmed that incoming new arrivals are generally processed within a few hours but always within 24. The facility reported the number of inmates admitted during the past 12 months who were given this information at intake is 842. The Auditor reviewed twenty-two files of inmates who arrived within the prior 12 months and found signed documentation that all received information about the zero-tolerance and how to make a report at intake within 24 hours.

115.33(b)(c): CD-150100 establishes that facility staff must provide information to inmates about sexual abuse, sexual harassment and sexual assault including: Prevention/intervention; Rights to be free from sexual abuse, sexual harassment, and retaliation for reporting such; Self-protection; How to report; Zero-Tolerance; Reporting sexual abuse/assault; and Treatment/Counseling. The agency completed a base-line rollout of comprehensive training in 2014 so all inmates incarcerated at that time were educated. The facility reported that 842 individuals were admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. An interview with the PCM confirmed that the PREA education is delivered to new arrivals during the reception process. Interviews with the incarcerated individuals confirmed that they had the PREA information within the first couple of weeks of their arrival, as well as every time that they have moved to a new facility. Each individual interviewed indicated they were aware of the PREA and who the PREA Compliance Manager is at the facility. The file reviews contained documented evidence that the inmates received the Inmate Handbook, PREA brochure, and PREA training.

115.33(d): CD-150100 further directs that staff assist individuals as needed in understanding orientation and PREA materials. This includes translations or alternative formats for individuals identified at intake or during orientation whose primary language is not English, who have sight and hearing barriers, or who have literacy barriers. This information shall be communicated orally and in writing, in a language clearly understood by the inmate, upon arrival at a facility. Information will be made available to inmates, as needed to include those who are Limited English Proficient, deaf, visually impaired, otherwise disabled and limited in reading skills. Participants who cannot speak/understand English will be provided the information

using an interpreter through the Language Line. The agency publishes the PREA hotline poster, Zero-Tolerance poster, and PREA brochure in Spanish, and English; the auditor observed these posters on bulletin boards and walls of housing and in common areas throughout the facility. When speaking with individuals who are LEP, they informed the auditor that their inability to speak English fluently had not affected their ability to participate in any facility-based services, including the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The auditor reviewed files for LEP individuals, and the documentation indicated they had received the PREA education material in a language they understood. The auditor interviewed six disabled inmates (2-physical; 3-cognitive; and 1 visually impaired) who reported their disability had not affected their ability to participate in any facility-based services, including the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

115.33(e): Written records of completion of orientation and PREA education signed by the individual utilizing the Inmate PREA Acknowledgement form are maintained in the inmate's folder. The Auditor reviewed twenty-two files of inmates and confirmed that the files contained signed acknowledgements of their receipt and understanding of comprehensive PREA education.

115.33(f): The auditor reviewed the SNMCF Inmate Handbook, which contains pertinent information regarding the individual's rights to be free from sexual abuse and how and to whom to make a report. During the site visit, the auditor observed posters in all of the housing units and in other common areas throughout the facility. Inmates mentioned the abundance of PREA posters in the facility during the interviews. The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, handbooks, or other written formats. Interviews with random inmates confirmed the PREA information is available to them at all times.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence: CD-150100; CD-031801 Office of Professional Standards (OPS), Personnel Investigations and Staff Misconduct Reporting; NIC Investigating Sexual Assaults in a Correctional Setting and NIC Investigating Sexual Assaults in a Correctional Setting Advanced Training Certificates; Observations During Facility Tour; Information Obtained from Interviews.
	115.34(a)(b)(c): CD-031801 requires that Investigators with specialized training in sexual abuse investigations in confinement settings must conduct sexual assault

	<p>investigations. All sexual abuse allegations are reported to the OPS. This directive also requires that the trained OSI Investigator complete sexual abuse allegations. The facility provided training records for the primary investigator who has completed the 40-hour OPS Investigator Training and PREA: Investigating Sexual Abuse in a Confinement Setting (both basic and advanced) Online Training. The OPS Investigator Training is a 40-hour comprehensive class certifying to conduct administrative investigations on behalf of the MNCD. The auditor reviewed the curriculum for the training and found that the training met and exceeded all criteria required in provision. There are eight back-up investigators that have also completed the required training. Additionally, the agency has (56) investigators statewide that have completed specialized training for investigations. OSI routinely assigns investigators from other facilities to conduct investigations involving staff.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance and exceeded the provisions of this standard.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence: CD-150100; Lesson Plan Forensic Medical Examinations Training for Correctional Medical and Mental Health Staff; Power Point Forensic Medical Examinations Training for Correctional Medical and Mental Health Staff; Medical & MH Specialized Training Certificates and Education Packets; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.35(a)(c): Policy CD-150100 requires that nursing staff, and full and part-time medical and mental health practitioners in health services, receive specialized training on how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and harassment, and how and to whom to report allegations or suspicions of sexual abuse and harassment. The facility reported on the PAQ there are twenty-three medical and mental health care practitioners who work regularly at SNMCF, and they have all completed the Just Detention International specialized training for medical and mental health staff. The auditor reviewed a sample of eleven certificates confirming completion of the required training. Interviews with the Medical Director, HSA, Nurse Administrator, Behavioral Health Supervisor, and nursing staff also confirmed they have met their training requirements.</p> <p>115.35(b): The facility medical department does not conduct forensic medical examinations; the facility transports inmates in need of FMEs to a community emergency center for the procedure.</p> <p>115.35(d): Medical and mental health practitioners are required to receive the same</p>

	<p>basic PREA training as all employees as discussed in the auditor’s narrative in 115.31; contracted providers comply with requirements of 115.32. Training curriculum for medical and mental health staff includes the basic training topics as well as specialized for this class of employees. Training records confirmed both specialized and basic PREA training was completed by all staff.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence: CD-150100; CD-150800; SRNS Assessment Tool; Completed Initial (48-hours) SRNS Assessment Tools; Completed 25-day Review Examples; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.41(a)(b): The NMCD has a written policy, CD-150100, that mandates inmates be screened with an objective screening tool, SRNS Assessment Tool, within 48 hours of arrival at the facility and reassessed 25 days after arrival, for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. The auditor reviewed twenty-two inmate files and determined that initial risk screenings were conducted within 48 hours, which exceeds the 72-hour requirement for this standard. The auditor observed the intake risk screening process during the site visit. An interview with the PCM found that all SRNS assessments are completed using a computer system. There is a comment section for each question and all information regarding the assessment such as the inmate information, screener information, dates, etc. are on the top of each assessment. The scoring tool is automatic, and each question is given a numerical value based on the response input into the system. The auditor selected twenty-two inmates to review initial screenings, confirming that individuals are screened for victimization and abusiveness during intake.</p> <p>115.41(c)(d)(e): The auditor’s review of the PREA Risk Assessment tool found it to be objective and consistent with best practices observed within other correctional systems. Each of the first nine considerations delineated in provision (d) is included as part of the risk screening form. NMCD does not detain individuals solely for civil immigration purposes; therefore, the tenth element is not included. The instrument provides consideration of known prior acts of sexual abuse, known prior convictions for violent offenses, and known history of prior institutional violence or sexual abuse in an effort to assess an individual's risk of being sexually abusive. Assessments are evaluated through direct conversation with the individual and a review of the individual's prior criminal history and institutional record.</p> <p>115.41(f)(g): CD-150100 requires that inmates be reassessed 25 days after the inmate’s arrival, for potential vulnerabilities or tendencies of acting out with sexually</p>

aggressive behavior. Inmates are also reassessed thereafter due to a referral, request, incident of sexual abuse or sexual harassment, or receipt of additional information that bears upon an inmate’s risk of sexual victimization or abusiveness. The auditor interviewed case managers and confirmed that they are notified through CMIS when a reassessment is coming due which allows them to complete it within 25 days according to policy. The PCM explained that after a PREA incident, a reassessment will be conducted on both the victim and perpetrator. Samples for twenty-two of these reassessments were selected by the auditor for review. Additionally, the facility provided an SRNS for inmates involved in a PREA allegation when a new assessment was warranted.

115.41(h): CD-150100 establishes inmates shall not be disciplined for refusing to participate in the screening process. None of the inmates interviewed reported being disciplined for refusing to participate in the screening process.

115.41(i): Auditor interviews with the PREA Coordinator and PCM confirmed the agency has outlined who should have access to an inmate’s risk assessment within the facility to protect sensitive information from exploitation, only the PCM, case managers, intake officers, and unit managers have access.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard; based on the timeliness completion of the initial assessments, the facility has exceeded the requirements of provision (b).

115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence: CD-150100; CD-150300; CD-080100; CD-150800; NMCD Organizational Chart; SRNS Assessment Tool; Completed Initial (48 hours) SRNS Assessment Tools; Completed 30-day Review Examples; Completed Transgender 6-month reassessments; CMIS Screen Shots of High Risk; Observations During Facility Tour; Information Obtained from Interviews.
	115.42(a)(b): CD-150100 establishes that housing and program assignments will be made using information obtained during the risk screening. The PCM, case managers, and medical staff explained that the facility uses information obtained in the risk screening for housing, bed, work, education, and program assignments with the goal of keeping separate individuals at high risk of being sexually victimized from those at high risk of being sexually abusive. This is also established through CD150800. Interviews confirmed that there is open communication among the Unit Managers, security, and case management staff, who talk regularly to discuss current issues that are going on in their respective areas of supervision. The PCM provided a report from the CMIS for nine inmates who scored high on their screening instrument which

automatically creates a "Caution" flag that will be reviewed by necessary staff when making housing, work, and programming assignments.

115.42(c)(g): NMCD has implemented a Transgender Policy, CD-150300 that provides guidelines for decisions on whether or not to assign a transgender or intersex inmate to a facility for male or female inmates. The policy establishes that the Transgender Advisory Group will consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. CD-150100 prohibits the placement of lesbian, gay, bisexual, transgender, gender non-conforming, or intersex individuals in dedicated facilities, units, or wings solely on the basis of such identification or status. The Deputy Warden and PCM confirmed SNMCF does not place lesbian, gay, bisexual, transgender, gender non-conforming, or intersex individuals in units, or wings solely on the basis of such identification or status. A review of the housing roster compared to the list of inmates identifying as LGBTI showed no pattern to indicate this is occurring. Additionally, interviews with inmates from this targeted category also confirmed they had never been housed in dedicated facilities, units, or wings solely on the basis of such identification or status. During an interview with the PREA Coordinator she explained that the NMCD is working on an MOU with the Transgender Resources of New Mexico with the intention of setting them up as a Volunteer entity which will allow them to support transgender inmates via zoom advocacy sessions, quarterly gift packages, connections to community therapeutic services, and educational materials for transition. In addition, she plans to work with them to create a digital training module for all facilities and all staff on transgender cultural fluency. NMCD has invested and purchased a Transgender Training Course which will be led and facilitated as a pilot program at WNMCF North Facility. Inmates will be allowed to join the program which provides education, resources, and support for those wishing to transition. The program will be led by the PREA Compliance Manager for WNMCF. NMCD is connected to a state-wide program funded by the University of New Mexico called Project ECHO that is an inmate run group that meets virtually weekly. Focusing on solutions, they train people who are incarcerated to become peer educators with the goal of educating the prison community on key health issues, increasing general health literacy, reducing risky behaviors and increase job readiness upon release. Within this program is a Transgender specific group. Additionally, the PREA Coordinator meets on a monthly basis with an Advisory Committee to discuss inmate requests and is currently working on a proposal to administration to go to a gender-neutral property list.

115.42(d)(e): CD-150800 directs that placement and programming assignments for each transgender and inmates must be screened every six months. Additionally, a transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. The auditor interviewed three inmates who identified as transgender and one intersex during the site visit. Documentation reviews confirmed that screenings were current, and the inmates confirmed quarterly meetings with the unit manager and classification staff.

115.42(f): CD-150800 establishes that transgender inmates who wish to shower separately in facilities with dorm style showers must request to do so in writing to the

	<p>Warden. The Warden will designate, by memo, two shower times (one morning and one evening) whereas the individual making the request can shower privately during count time. SNMCF has individual showers where all inmates may shower privately. Interviews with inmates, security supervisors, security line staff, and the PCM confirmed that transgender inmates are allowed to shower separately from other individuals upon request. Random staff interviews also confirmed their awareness of allowing inmates with a shower pass to shower during the designated times.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. Additionally, the facility and agency exceeds by having a clearly documented method of demonstrating the use of the screening information to keep inmates separated by the CMIS system automatically flagging high risk inmates within the system based on information obtained from the screening instrument, thereby decreasing the potential for inmates who should not be comingled to be assigned together.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence: CD-150100; CD-141100; CD-141500; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.43(a)(b)(c)(d)(e): CD-150100 establishes the placement of inmates determined to be at high risk of sexual victimization into Special Management shall be cited the basis for the facility’s concern for the inmate’s safety and the reason why no alternative placements are appropriate consistent with NMCD Special Management policies. CD-141500 establishes that inmates in Extended Restrictive Housing have access to programs and services that include but are not limited to the following: educational services, commissary services, library services, social services, behavioral health and treatment services, religious guidance, and recreational programs. Further, CD-141500 provides Inmates in Restrictive Housing will have a status review completed by the classification committee or other authorized staff every 7 days for the first 60 days and at least every 30 days thereafter. The facility indicates that no individuals at high risk of sexual victimization were placed in involuntary segregated housing within the audit period, which was confirmed through interviews with the Deputy Warden, PCM/Investigator, and staff who work the segregated housing unit. There were no inmates placed in involuntary segregated housing based on being at high risk for sexual victimization; this was confirmed through interviews with the PCM, Unit Managers, and restricted housing officers.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence: CD-150100; CD-150101; NMCD PREA Poster English/Spanish; SNMCF Inmate Handbook, English/Spanish; Intergovernmental Agreement SNMCF and Colorado Corrections Department (3rd Party Reporting); Reported Allegation Samples; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.51(a): SNMCF offers multiple ways to report sexual abuse and sexual harassment. Reports can be made anonymously. Options include calling the Rape Crisis Center of Central New Mexico Hotline from any inmate phone at *9999 or (505) 266-7711; calling the NMCD PREA Reporting line from any inmate phone at *8888 or (505) 827-8524; writing directly to the Warden; reporting to any staff, volunteer, contractor, or medical or mental health staff; submitting a grievance or sick call slip; reporting to the PREA Coordinator or PCM; have a family member or friend report it to the facility or email PREAReporting@statenm.us. Incarcerated individuals are also informed that they may make a report on behalf of someone else. The auditor confirmed during interviews with the incarcerated individuals that they were aware of the multiple methods by which a report of sexual abuse or sexual harassment could be made and understood clearly that the facility has a zero-tolerance for any type of sexual activity, abuse, harassment, or retaliation. Most of the individuals stated that they would feel comfortable reporting directly to a staff member. Calls were successfully placed to Rape Crisis Center of Central New Mexico Hotline and the NM CD PREA Reporting line. The number to the NMCD PREA Reporting Line is (505) 827-8524.</p> <p>115.51(b): CD-150101 establishes that incarcerated individuals may also report an allegation of sexual abuse or harassment to the Colorado Corrections Department, an office that is not part of the NMCD, by writing to PREA, Colorado Corrections Department. The PREA, Colorado Corrections Department will receive and immediately forward reports of sexual abuse, sexual harassment, and unauthorized relationships to the Agency PREA Coordinator for review and investigation. An incarcerated individual may request that the PREA Colorado Corrections Department allow them to remain anonymous, and the PREA Colorado Corrections Department will not include their name in the report. This method is further confirmed by the Intergovernmental Agreement for PREA Reporting from July 21, 2021 to June 30, 2026, dated December 6, 2022, provided for the auditor's review.</p> <p>115.51(c): CD-150101 requires staff to accept reports of sexual abuse, sexual harassment, and unauthorized relationships made verbally, in writing, anonymously, and from third parties. Any verbal reports are to be promptly documented and forwarded for investigation. This information is also covered in the Prison Rape Elimination Act training that is mandated for all staff prior to assuming any duties for the NMCD.</p> <p>115.51(d): CD-150101 establishes employees are encouraged to report misconduct to</p>

	<p>a higher authority if their direct supervisor may be involved or if the report has not been given the appropriate attention at the reported level. Multiple channels will be made available for reporting including, but not limited to, other disciplinary authorities such as the Warden, Regional Managers or OPS. Staff interviews confirmed that they are aware they may go outside of their chain of command and report misconduct privately.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.52	<p>Exhaustion of administrative remedies</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence: CD-150100; CD-150101; CD-150500; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.52(a): CD-150500 establishes that all grievances for Department personnel sexual misconduct will be completed in an expedited manner with fairness and consistency. Based on an interview with the Grievance Officer and Deputy Warden, the grievance officer will notify the Warden or his or her designee within one working day of the verifiable emergency grievance. The Warden shall complete a referral for an OPS investigation on all PREA related grievances. The grievance officer will immediately respond to the inmate with “this grievance has been referred for investigation to OPS. The PCM will also be notified, and the investigation will be handled by a trained investigator that has completed special training for sexual assault cases and will not be processed through the established Grievance Process. Since the facility has no administrative procedure for dealing with inmate grievances regarding sexual abuse, the facility is exempt from 115.52.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility demonstrated compliance with this standard, through non-applicability.</p>
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115.53	<p>Inmate access to outside confidential support services</p> <p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-041000; CD-150300; CD-151200; SNMCF and La Pinon Sexual Assault Recovery Services MOU; Inmate PREA Handbook English/Spanish; PREA Inmate Intake Sheet; PREA Posters for Advocacy (English & Spanish); PREA Wall Paintings; Observations During Facility Tour; Information Obtained from Interviews.</p>
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115.53(a)(b)(c): The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. Painted on each housing unit is the toll-free, unmonitored hotline number *9999 which connects directly to a counselor at LaPinion Sexual Assault Recovery Services. The auditor placed a call to the *9999 number from a randomly selected dormitory phone and completed a call directly to a counselor at LaPinion. Additionally, posters are made available throughout the facility in the library, chapel, and kitchen providing the same contact information for advocacy and outside confidential support, including the speed dial and local number. The Inmate PREA Handbook, which is provided to every inmate during orientation, states: "If you would like advocacy or to talk to someone from your local Rape Crisis Center, you may dial *9999 from any inmate phone. This call is free, unmonitored and unrecorded and will not require you to enter your PIN number. These calls and all advocacy calls will be free of charge. Advocacy may be used for previous incidents of sexual assault or abuse even when not related to your incarceration with NMCD. Advocates are required to make a report if you indicate that you are going to hurt yourself or someone else. Each inmate Library has a PREA RESOURCE GUIDE which has additional reporting addresses, phone numbers and resources as well as advocacy groups that are available to the inmate population." The facility also has an identified victim advocate who may also assist in connecting inmates to outside confidential support services when requested. Directive CD-151200 establishes that all PREA mail is considered privileged correspondence and may be sealed by the inmate and dropped in the special box provided for such letters. An interview with the mailroom staff confirmed that mail of this type is not inspected unless in the presence of the inmate. Directive CD-150300 establishes that calls to a local rape crisis center with whom the facility has a memorandum of understanding (MOU) will be unmonitored. CD041000 establishes that all inmates will receive facility specific information related to Sexual Abuse during orientation. In addition to receiving the Inmate PREA Handbook, the inmate receives a facility specific handout (in English or Spanish) that recaps the zero-tolerance policy, how to report, and information on local confidential advocacy services. The facility entered an MOU with La Pinon Sexual Assault Recovery Services, effective January 19, 2023, to provide services for inmates at SNMCF. These services include access to a victim advocate via phone, mail, and/or virtual meetings; in-person advocacy when resources and safety permits; respond to requests from SNMCF to provide a victim advocate for hospital accompaniment for incarcerated victims during the forensic medical exam; provide contact information for resources for follow-up services and post-incarceration resources. Inmate interviews confirmed that they are made aware of these confidential advocacy services.

Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. The facility exceeds by having multiple ways to make inmates aware of these services and maintaining a working relationship with the center.

115.54	Third-party reporting
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed: PREA Pamphlet; PREA Posters English/Spanish: Inmate Handbook English/Spanish; NMCD PREA Resource Guide for Inmates; Agency Website; Visitor's PREA Guide; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.54(a): The agency has established a method to receive third-party reports of sexual abuse and sexual harassment by providing a toll-free PREA Hotline at 505-266-7711, and callers may remain anonymous. Additionally, third parties can e-mail PREAReporting@state.nm.us, or contact an outside agency by writing to Colorado Department of Corrections, 1250 Academy Park Loop Colorado Springs, CO 80910. Posters containing this information are posted throughout the facility in areas where incarcerated individuals and visitors have access and are published in both English and Spanish. This number is also available for staff to privately report sexual abuse and is posted on staff bulletin boards. Information on third party reporting is made public on the department website by accessing the following drop-down menus: Division\Administrative Support\Office of Inspector General\Prison Rape Elimination Act. Interviews with residents confirmed they are aware they can have a family member or friend make a report of sexual abuse, sexual harassment, or retaliation on their behalf through third-party reporting.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

<p>115.61</p>	<p>Staff and agency reporting duties</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence: CD-150100; CD-150101; CD-180200; CD-180201; Form 180201-1, Rights to Confidentiality and Availability of Services; PREA Training Curricula; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.61(a): CD-150101 establishes all employees are required to report immediately 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All reports shall be forwarded to applicable disciplinary authority such as the Warden, Region Manager, Bureau Chief, or Division Director and the Office of Professional Standards (OPS). The auditor's interviews with staff confirmed a clear knowledge of their duty to immediately report such incidents.</p> <p>115.61(b): CD-150101 Includes the requirement for all staff to maintain the</p>

	<p>confidentiality information related to reports of sexual abuse and requires that apart from reporting to designated supervisors or officials, staff shall not reveal 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. Staff interviews confirmed a thorough knowledge of confidentiality and that release of this information outside of official need is a violation of the employee standards of conduct and agency policy.</p> <p>115.61(c): Medical and mental health staff interviewed by the auditor confirmed that the mandatory reporting of incidents of sexual abuse and sexual harassment that occur during incarceration is a requirement and is not affected by any Federal, State, or local law to be withheld for confidentiality purposes. Medical and mental health staff are mandatory reporters. During the interview process with inmates, medical and mental health staff inform all incarcerated individuals of the limitations of confidentiality prior to delivery of services. This information is conveyed through form 180201-1.</p> <p>115.61(d): If the alleged victim is under the age of 18, the facility must notify the New Mexico Children, Youth, and Facilities Department. If the alleged victim is a vulnerable adult, the New Mexico Adult Protection Services. There have been no sexual abuse or harassment allegations involving a juvenile or vulnerable adult within the audit period.</p> <p>116.61(e): CD-150101 mandates the facility to report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. Interviews with staff confirmed that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are required to be reported to the shift supervisor immediately, who will then report to the facility's designated investigators. Interviews with shift supervisors and the PCM confirmed that these protocols are followed.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence: CD-150100; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.62(a): CD-150100 requires all staff, vendors, contractors and volunteers to immediately report the following: 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; retaliation against inmates or staff who reported such</p>

	<p>an incident; and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. These must immediately be reported to one or more of the following persons: Secretary of Corrections, Office of Professional Standards Case Assignments Officer, Inspector General, PREA Coordinator, Warden, Shift Supervisor, Institutional Investigator, District Supervisor or any other employee of NMCD. When staff or the agency believes that an inmate is at substantial risk of imminent sexual abuse or sexual harassment, it shall take immediate action to protect the inmate. The facility indicated there were no inmates at substantial risk of imminent sexual abuse or sexual harassment during the reporting period. Random and formal interviews with all levels of staff confirmed that if they become aware of an inmate who is at a substantial risk for sexual abuse it will be immediately reported to the shift supervisors and measures will be taken to ensure the safety of the individual.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.63 Reporting to other confinement facilities	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence: CD-150100; Facility-to-Facility Verification E-Mails; Behavioral Health Referrals, Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.63(a)(b)(c): CD-150100 states if an inmate reports or staff become aware of any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in another facility, the Warden of the facility that received the information must immediately (no later than 72 hours) report it to the Warden of the facility where it is alleged to have occurred. If the incident is alleged to have occurred at an agency other than NMCD, that report should be forwarded to the Agency PREA Coordinator, who will immediately (no later than 72 hours) notify the outside agency. The facility must maintain documentation of all notifications to other facilities; the PREA Coordinator will maintain documentation of all external notifications. The facility reported receiving five reports that an inmate was abused while confined at another facility. The auditor reviewed the Warden-to-Warden notifications, supporting compliance with notification requirements.</p> <p>115.63(d): CD-150100 requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. The facility reports there was one report of sexual abuse or sexual harassment alleged to have occurred at SNMCF received from another facility within the audit period which was promptly investigated</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence: CD-150100; CD-150102; Form CD-150102.1 Facility Response to Sexual Assault Checklist; PREA Course Curricula; Corrections 101 Agenda and Power Point; First Responder Card; Case Files; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.64(a)(b): CD-150102 identifies a step-by-step process for first responder protocols for an incident of sexual abuse. These steps include to place the affected unit on a lock-down and suspension of program services for an appropriate time; upon identification of the victim and assailant(s), the facility or program administrator will assure the separation of the victim from his or her assailant(s). The victim will be asked not to shower, wash their clothes, brush their teeth, or relieve him or herself in order to preserve evidence. The facility reported there were no allegations that an inmate was sexually abused in the last 12 months that required securing of physical evidence and referral for a forensic examination. The Sexual Abuse Prevention and Response training is mandatory for all staff and includes specific training in first responder duties. Various staff interviewed had the PREA First Responder Pocket Card issued by the facility, which provides step-by-step instructions for a First Responder. The auditor conducted interviews with random security and non-security staff and found them all to be very knowledgeable about their first responder duties, and no one had to reference their pocket card. Training records confirmed that staff received this training during their initial and annual in-service. The auditor's review of the completed case files confirmed that applicable First Responder steps were appropriately applied once staff were made aware of the allegation in all cases.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.65	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence: CD-150102; Form CD-150102.1; Form CD-070701.5; Coordinated Response Plan; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.65(a): CD-150102 directs the facility develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The SNMCF coordinated response plan describes expectations regarding a sexual abuse coordinated response plan which includes instructions on separating the</p>

	<p>alleged victim and abuser, protecting the crime scene for a collection of evidence, advising both the alleged victim and alleged aggressor not to take any actions that could destroy physical evidence. The incident report and supporting documentation must be completed before leaving the institution for the day and is completed in accordance with related policy. The PCM has developed a written SNMCF Sexual Abuse/Sexual Harassment Response Guide that contains a well-designed and complete coordinated response plan to coordinate the actions among facility staff, leadership, and community providers. This document has a table of contents making it an easy reference for users. All duties and responsibilities are outlined in the specified sections and a complete listing of phone numbers and contacts are included. This document exceeds the requirements of this standard. The coordinated response to an incident includes upon becoming aware of an incident, the shift supervisor shall make an immediate verbal report to the Warden, and the Warden shall in turn make an immediate report to the PREA Coordinator, the Director of Adult Prisons and the Director of Health Services. The Warden will also complete the Referral for Investigation form to Office of Professional Standards (OPS) as a Level I investigation. The shift supervisor will use the Serious Incident Checklist (CD-070701.5) form to ensure that all pertinent documentation of a major incident is completed. The shift supervisor will contact the designated victim advocate. The shift supervisor completes section I of the Facility Response to Sexual Assault Checklist form (CD-150102.1) and submits to the Warden's office. The CD-150102.1 form includes action steps for the Shift Supervisor, PCM, Medical Staff, Behavioral/Mental Health Staff and Warden, and has an attached supplement that includes the Advocacy Group contact information and contact names and numbers for key staff. The Warden completes sections II and III of the checklist and submits it to the Director of Adult Prisons or designee within seven calendar days after the incident.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard and the facility exceeded the requirements of this standard with the development of a comprehensive, complete Response Guide.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence: Agreement Between AFSCME and State of NM 8/5/2022-12/31/2025; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.66(a): Based on interviews with the Deputy Warden, Agency PREA Coordinator, Inspector General, Agency Head's Designee, and a review of the labor agreement in place the Appointing Authority may place an employee who is the subject of a disciplinary investigation on investigatory leave with pay provided a reasonable basis</p>

	<p>exists to warrant such leave. The facility indicated no instances within the audit period where it was necessary for an employee to be removed from inmate contact for a PREA allegation.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence: CD-150102; Completed Retaliation Monitoring Forms; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.67(a)(b)(c)(d)(e): CD-031800 establishes that there is a zero-tolerance policy prohibiting any retaliatory acts against anyone who has reported allegations of staff misconduct or criminal acts. Any employee who engages in substantiated retaliatory behavior is subject to dismissal. CD-150102 establishes that the facility PCM must immediately begin victim retaliation monitoring to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigation from retaliation by other inmates or staff. Staff monitoring will be completed utilizing the Staff Retaliation Monitoring form (CD-150102.2) and once completed at the end of 90 days (or longer when necessary) be sent to the Agency PREA Coordinator. Inmate monitoring will include periodic status checks. This contact may increase if needed. Anyone who cooperates with an investigation is protected from retaliation. If the allegation is determined to be unfounded, the obligation to follow up ends. The Inmate Victim Retaliation Monitoring Form will be completed for each offender monitored. This form includes incident information and requires a review of the individual’s conduct and treatment, possible retaliation from others, any recent housing changes, program changes, negative performance reviews, or disciplinary actions. There is space for the monitor to record observations and any actions taken during the monitoring period. Instructions require monitoring for up to 90 days or extended if deemed necessary. The PAQ indicated four incidents of retaliation, however, an interview with the PCM/Investigator clarified that this was the number of cases monitored. The facility had no allegations of retaliation occurring in the past 12 months. The Auditor reviewed the completed retaliation forms for the qualifying cases and found the processes to be thorough and consistent with the requirements of this standard.</p> <p>Based on analysis and evaluation of the stated evidence, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.68	Post-allegation protective custody
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence: CD-141100 Protective Custody Policy; Form CD-141500.3, 7/30 Day Review; CD-150100; Observations During Facility Tour; Information Obtained from Interviews.</p> <p>115.68(a): As noted in 115.43, the agency has written policy to govern the management of individuals placed in segregated housing, which is compliant with the requirements of this standard. CD-150100 establishes the placement of inmates determined to be at high risk of sexual victimization or placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless into Special Management shall cite the basis for the facility's concern for the inmate's safety and the reason why no alternative placements are appropriate consistent with NMCD Special Management policies. CD-141500 establishes that inmates in Extended Restrictive Housing have access to programs and services that include but are not limited to the following: educational services, commissary services, library services, social services, behavioral health and treatment services, religious guidance, and recreational programs. Further, this policy provides inmates in Restrictive Housing will have a status review completed by the classification committee or other authorized staff every 7 days for the first 60 days and at least every 30 days thereafter. The facility indicates there were no inmates who alleged sexual abuse placed in involuntary segregated housing within the audit period, which was further confirmed during interviews with the Deputy Warden, PCM, and staff working the restricted housing unit.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

<p>115.71</p>	<p>Criminal and administrative agency investigations</p>
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed: CD-150101; CD-031800; CD-031801; Form CD-150100.1; Case Files; Allegation Summary Tracking; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.71(a)(f)(g): CD-15010 establishes that the Agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment and CD-031801 governs the investigative procedures. A prompt, thorough and objective investigation of an incident involving sexual misconduct is completed by an assigned investigator. The assigned investigator gathers and examines all physical and documentary evidence including reports, records, photographs, equipment, or any other pertinent information. The assigned investigator contacts all witnesses and schedules an interview with them. The</p>

interviews are conducted in a thorough, predetermined, and systematic manner regarding all of the allegations. Investigations involving represented employees will be conducted in accordance with applicable provisions of the Collective Bargaining Agreement (CBA). All allegations of criminal conduct including criminal sexual penetration of an inmate by a staff member must be reported to the appropriate law enforcement authorities by the investigations officer. The investigations officer will serve as the liaison between the NMCD and the appropriate law enforcement agency during the course of any continuing investigation. Once evidence collection and witness interviews are complete, the Warden prepares a step-down plan and submits it to the Director of Adult Prisons for approval. This plan will include time that provides a gradual release such as visits for non-affected areas, pod restrictions, phone calls, etc. This plan will include the date and time frames as well as any extra security staff required. The assigned investigator completes the investigation report, form (CD-031801.2) within 23 calendar days. Based on an interview with the PCM/ Investigator, cases at the local level will be completed within 23 calendar days unless it requires longer to complete a thorough investigation. Additionally, the PCM/ Investigator explained that all allegations, regardless of how they are received, are investigated thoroughly, objectively, and promptly, including third-party and anonymous reports. There were seven allegations reported and investigated at the facility during the audit period. The Auditor interviewed two inmates who reported sexual abuse at this facility. The Auditor also reviewed all case files and determined that the cases were referred for either administrative or criminal investigation, when warranted.

115.71(b): CD-031801 requires that Investigators with specialized training in sexual abuse investigations in confinement settings must conduct sexual assault investigations. All sexual abuse allegations are reported to the OPS. This directive also requires that the trained OSI Investigator complete sexual abuse allegations. The facility provided training records for the primary investigator who has completed the 40-hour OPS Investigator Training and PREA: Investigating Sexual Abuse in a Confinement Setting (both basic and advanced) Online Training. The OPS Investigator Training is a 40-hour comprehensive class certifying to conduct administrative investigations on behalf of the MNCD. The auditor reviewed the curriculum for the training and found that the training met and exceeded all criteria required in provision. There are eight back-up investigators that have also completed the required training. Additionally, the agency has (56) investigators statewide that have completed specialized training for investigations. OSI routinely assigns investigators from other facilities to conduct investigations involving staff. The auditor's review of the seven case files found that they were all completed by a specially trained investigator.

115.71(c): CD-150101 states that Investigators are able to obtain usable evidence to substantiate allegations and hold perpetrators accountable. The PCM/Investigator explained during her interview that during the course of an investigation she gathers and examines all physical and documentary evidence including reports, records, photographs, equipment, or any other pertinent information. Additionally, she contacts all witnesses and schedules an interview with them. She conducts her

interviews in a manner that is thorough, predetermined, and systematic and addresses all issues presented in the allegation. The auditor's review of seven case files confirmed clear documentation of all evidence collected and considered in the case, lists and responses by witnesses, victims, and perpetrators (where applicable), and copies of documents considered. The auditor observed during the review of the seven case files that the PCM/Investigator investigated and documented all cases with the thoroughness and comprehensiveness of a case that would be referred for criminal prosecution; therefore, exceeds the requirements of this provision.

115.71(d)(h): In accordance with CD-031801, upon a belief that probable cause for criminal prosecution exists, the Bureau Chief of OPS shall conduct a review to determine the admissibility of compelled statements. If, upon completion of review the investigator believes a referral can be made for prosecution, the Bureau Chief of OPS shall consult with the NMCD General Counsel. The facility indicated no substantiated allegations of criminal conduct occurred. Interviews with the Deputy Warden and Investigative staff confirmed that substantiated allegations of conduct that appears to be criminal will be referred for prosecution following policy CD-031801.

115.71(e): CD-150101 states that 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 or staff. NMCD will not require an inmate 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. Interviews with the Deputy Warden and PCM/Investigator confirmed that credibility of all persons is evaluated on a case-by-case basis and is not biased toward staff. The auditor's review of seven case files confirmed that credibility of the victim, suspect, and witnesses were clearly documented and supported unbiased decisions. None of the cases reviewed involved the use of a polygraph examination.

115.71(i): CD-150101 states that all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment are to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus 5 years, at a minimum. The policy further states that 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. The auditor observed the physical storage areas of case files and other documentation collected and maintained by the facility. Inmate files are located in the main file room which is secured with limited access files folders are stored in locked filing cabinets. Medical and mental health maintain their own records which are also filed in secured filing cabinets behind a secured office door. The PCM maintains all investigative files, both hard copy and electronic. These are stored in her office in a locked cabinet as well and only she and the Warden have access. Sensitive electronic information is controlled through user access, and only staff who need to have access to PREA related information is granted access.

115.71(j): CD-031800 establishes that employee conduct involving allegations of sexual misconduct, sexual assault or any other alleged violations of the criminal law

	<p>shall be referred to local law enforcement for consideration for prosecution. These referrals shall be made even if the employee resigns or retires during or prior to the NMCD's investigation. In the event there is an investigation regarding allegations of misconduct, which if proven true would constitute a crime, the employee will not be allowed to resign in lieu of administrative action or referral for criminal prosecution unless approved by the Deputy Secretary of Operations or Deputy Secretary of Administration, as applicable.</p> <p>115.71(l): The PCM/Investigator and Deputy Warden both confirmed during interviews that if a case is investigated by the NM State Police, the facility will cooperate fully and will maintain regular contact with the assigned Investigator to stay current with the progress of the case. Based on the auditor's review of the seven case files, referrals to the NM State Policy are documented in the file. One case was referred for criminal investigation and is still pending disposition.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. The quality of investigations and subsequent documentation based on the files reviewed warrants an exceed.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-031800; Case Files; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.72(a): CD-031800 defines preponderance of evidence that is of greater weight or more convincing of the evidence that is offered in opposition to it and that evidence as a whole shows that the fact sought to be proved is more probable than not. A written directive and interview with the PCM/Investigator confirmed that the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was also confirmed during interviews with two additional backup investigators. The auditor reviewed seven case files which supported the investigator used preponderance of evidence as the burden of proof to determine the disposition in each case.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.73	Reporting to inmates
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	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-031801; Case Files; Disposition Notifications to Inmates; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.73(a)(c)(d)(e): Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The auditor reviewed seven closed case files and found that three of the allegations were abuse allegations. The facility indicated that all three inmates were notified, and the facility provided sampled documented evidence that the alleged victim was notified of the disposition. CD-150100 establishes that at the conclusion of an investigation into an inmate's allegations against a staff member, the inmate will be informed in writing (unless the investigation determines that the allegation is unfounded) whenever the staff member is no longer posted in the inmate's unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; the staff member has been convicted on a charge related to sexual abuse within the facility. At the conclusion of an investigation into an inmate's allegation against another inmate, the alleged victim will be informed in writing when whether the alleged abuser has been indicted on a charge related to the sexual abuse in the facility; and, upon the agency learning that the abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>115.73(b): CD-031801 states that all allegations of criminal conduct including criminal sexual penetration of an inmate by a staff member must be reported to the appropriate law enforcement authorities by the investigations officer. The investigations officer will serve as the liaison between the NMCD and the appropriate law enforcement agency during the course of any continuing investigation. The agency investigations officer will obtain relevant information from the investigative agency in order to inform the inmate. One case was referred for a criminal investigation and is still pending disposition.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-031800; CD-037800; CD-032200; Case Files; Information Obtained from Interviews; Observations During Site Visit.</p>

	<p>115.76(a)(b)(c)(d): CD-150100 establishes that sexual conduct between staff and inmates, volunteers, or contract personnel and inmates, regardless of consensual status, is prohibited and subject to administrative discipline, up to and including termination, and criminal sanctions and referred to local law enforcement authorities for possible criminal prosecution. For matters of sexual abuse, termination is the presumptive disciplinary sanction for staff who engaged in sexual abuse. Licensed professionals engaging in sexual conduct with inmates will be reported to any relevant licensing body. Disciplinary sanctions for violations of agency 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 staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. The facility indicated no substantiated cases of staff-to-inmate sexual abuse; therefore, no disciplinary actions were taken. The auditor interviewed the Deputy Warden, HR Director, and Inspector General and confirmed there have been no staff disciplinaries for violation of the sexual abuse policies.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.77 Corrective action for contractors and volunteers	
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-031800; CD-037800; CD-060200; Case Files; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.77(a)(b)(c)(d): CD-150100 establishes that sexual conduct between volunteers, or contract personnel and inmates, regardless of consensual status, is prohibited and subject to administrative discipline, up to and including termination, and criminal sanctions and referred to local law enforcement authorities for possible criminal prosecution. Licensed professionals engaging in sexual conduct with inmates will be reported to any relevant licensing body. CD-060200 establishes that the Warden may discontinue services of any volunteer for cause. The facility indicated no substantiated cases of contractor or volunteer sexual abuse; therefore, no disciplinary actions were taken. Interviews with the Deputy Warden, HR Director, and PCM confirmed there have been no incidents involving a contractor or volunteer within the audit period. The Deputy Warden confirmed during his interview that he has the authority to terminate a contractor or volunteer from entry to the facility during an investigation. He further explained that anyone violating the sexual abuse policies would be removed from the approved list pending the results of the investigation.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed: CD-150101; CD-150600; CD-090100; Case Files; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.78(a)(b): CD-150101 establishes that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or sexual harassment or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. There were no administrative or criminal findings of guilt in the past 12 months. Based on an interview with the Deputy Warden and the Disciplinary Hearing Officer (DHO), inmates receiving disciplinary actions receive sanctions only after due process according to the procedures outlined in CD-090100. Inmates are advised of the disciplinary process during orientation at the facility.</p> <p>115.78(c)(d): CD-090-100 requires that the Misconduct Mental Health Review form be completed when any inmate is charged with Sexual Misconduct/Sexual Activity; Rape; Sexual Harassment; and making false PREA allegations. A copy of the Inmate Misconduct Mental Health Review form and a copy of the disciplinary report is submitted to the Behavioral Health Supervisor who will determine whether an inmate's mental disability contributed to his behavior when determining what type of sanction should be imposed. Additionally, behavioral health providers will make a determination to correct underlying reasons or motivations for the abuse and will consider whether to require the offending inmate to participate in interventions as a condition of access to programming or other benefits. Interview with the Behavioral Health Supervisor confirmed that behavioral health staff reviews disciplinary actions taken on inmates related to sexual abuse and sexual harassment to assist in determining if their mental health condition at the time of the incident may have contributed to the actions or behavior. The DHO also confirmed that the review form must be completed by Behavioral Health before the disciplinary process moves forward.</p> <p>115.78(e): The facility will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The facility indicated there were no incidents of this nature within the audit period, which was confirmed during interviews with the PCM and Deputy Warden.</p> <p>115.78(f): CD-150100 states that any employee, inmate, or other person who in good faith reports abuse or sexual misconduct will not be subject to retaliation by staff or inmates. Information will be kept confidential. Wardens or their designees will monitor those who report sexual abuse or cooperate with investigations for ninety (90) days and take appropriate steps to protect individuals from retaliation, including periodic</p>

	<p>status checks on inmates. CD-150100 and CD-150600 state that failure to report or knowingly submitting a false report may result in disciplinary action.</p> <p>115.78(g): Consensual sexual activity between inmates is prohibited and actions of this nature subject to disciplinary action.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed: CD-150100; CD-150100.1; CD-180200; CD-180201; CD-180201.1; Examples of Referrals of Prior Victims; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.81(a)(b): CD-150102 establishes that an inmate identified as high risk for sexually assaultive behavior or who has a history of sexually assaultive behavior will be assessed by a mental health or other qualified professional. Inmates identified as at risk for sexual victimization shall be assessed by a mental health or other qualified professional within 14 days of learning of such abuse history and offered treatment when deemed appropriate by mental health practitioners. CD-180200 establishes that all intersystem and intra-system transfer inmates will receive an initial mental health screening at the time of admission to the facility by mental health trained or qualified mental health care professional. Additionally, all intersystem inmate transfers will undergo a mental health appraisal by a qualified mental health person within 14 days of admission to a facility. The facility indicated that 57 inmates (100%) who disclosed prior sexual victimization during intake were offered a follow-up meeting within 14 days of the intake screening. Interview with the PCM and HSA confirmed that notifications are made by email so they will be documented. They explained that once an inmate is identified as having high potential for sexual victimization or as an aggressor, or if the inmate has been convicted of perpetrating sexual abuse or experienced prior sexual victimization a form is completed to make a referral to Behavioral Health. This form allows the inmate to indicate by signature if they wish to participate in a follow-up meeting or if they wish to decline. Additionally, the inmate is advised that if they decline and then decide later they want to participate, they are to advise the PCM. Even if the inmate declines the referral, a referral is still submitted and Behavioral Health meets with the inmate to offer them services. Interviews with the Behavioral Health Supervisor and other two mental health professionals confirmed that any inmates referred for a follow-up as a result of the risk screening are seen at least within 14 days, although it is generally much sooner. Documentation is maintained by Behavioral Health staff of these referrals in the inmate's records when the follow-up is conducted and whether or not services are recommended. The</p>

	<p>auditor reviewed nine examples where prior victims were identified at intake during the screening and were referred to behavioral health for evaluation. Review of the tracking sheet indicated all referrals were seen within the 14 days.</p> <p>115.81(d)(e): CD-180200 and CD-180201 establish that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. CD-180201.1, Rights to Confidentiality and Availability of Services form ensures that medical and mental health practitioners advise the inmate of the limitations of confidentiality prior to services being provided. This form additionally advises the inmate that informed consent of the inmate is required before information about prior sexual victimization that did not occur in an institutional setting is reported. The facility provided an example of a signed form.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. The facility exceeds provision (a) by the PCM tracking inmates who flag for a referral and that the referrals are completed.</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>Evidence Reviewed: CD-150100; CD-170100; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.82(a)(b)(c)(d): CD-150100 ensures that victims receive all necessary immediate and ongoing medical, mental health, and support services. CD-150102 establishes that the Warden or designee will ensure that victims of sexual assault are promptly transferred under appropriate security provisions by Emergency Medical Services or NMCD personnel as is medically appropriate to a community health care facility for treatment and gathering of evidence at no charge to the inmate. The consent of the victim is required for any routine emergency examination and treatment offered at the community health care facility, which is not otherwise required by law. The examiner will prepare consent forms for the examination, establish the medical forensic history, photograph medical evidence, perform the examination and collect medical evidence will gather toxicology samples for drug testing, perform a sexually transmitted infection evaluation and provide for treatment, perform a pregnancy risk evaluation and schedule follow-up care, and provide follow up instructions and release the victim for discharge. For after action and follow-up care, the Warden will develop a victim safety action plan. The facility medical director will initiate the 48-hour medical treatment review of the victim. A facility mental health professional</p>

	<p>will perform an evaluation to assess the need for crisis intervention and long-term follow-up and the facility medical director and mental health supervisor will develop a treatment plan for follow-up services. The assigned investigator shall perform a follow-up interview with the victim. The assigned mental health provider will provide access to counseling and advocacy services. No FMEs were conducted within the audit period. The HSA confirmed that services provided are at no cost to the inmate. These procedures were confirmed during interviews with the Medical Director and Behavioral Health Supervisor.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</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>Evidence Reviewed: CD-150102; CD-170100; CD-180100; Information Obtained from Interviews; Referrals for Known Abusers; Observations During Site Visit.</p> <p>115.83(a)(b)(c)(f)(g): CD-150102 establishes that the Warden or designee will develop a victim safety action plan after an incident of sexual abuse at the facility. The facility medical director will initiate the 48-hour medical treatment review of the victim. A facility mental health professional will perform an evaluation to assess the need for crisis intervention and long-term follow-up, The facility medical director and mental health supervisor will develop a treatment plan for follow-up services. The assigned investigator shall perform a follow-up interview with the victim. The assigned mental health provider will provide access to counseling and advocacy services. Victims receive all necessary immediate and ongoing medical, mental health, and support services. Interviews with the HSA and Behavioral Health Supervisor confirmed that these services are available to all victims of sexual abuse, even if the incident did not occur at this facility. The auditor reviewed nine victim referrals for follow-up treatment and confirmed that those with sexual victimization histories are offered and provided treatment services.</p> <p>115.83(d)(e): CD-150100 states that the examiner will perform a pregnancy risk evaluation and schedule follow-up care for inmate victims of sexually abusive vaginal penetration while incarcerated. Victims shall be given timely information and access to all lawful pregnancy related services. SNMCF houses male offenders, therefore, exempt from these provisions.</p> <p>115.83(h): CD-150100 states that a mental health evaluation of all known inmate-on-inmate abusers shall be conducted within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p>

	<p>Interview with the Behavioral Health Supervisor confirmed that all known abusers are referred to behavioral health for services, although acceptance of treatment is optional to the inmate unless mandated by the courts. The auditor reviewed four aggressor referrals for follow-up treatment and confirmed that those with abusive histories are offered treatment services.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>
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115.86 Sexual abuse incident reviews	
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; CD-115102; CD-150102.3 Sexual Abuse or Assault Incident Review Team form; CD-150102.4 PREA Sexual Abuse Response Team Committee Confidentiality Agreement form; CD-150102.5 Monthly PREA Incident Tracking Log form; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.86(a)(b)(c)(d)(e): CD115102 establishes that the Warden and PCM shall complete the sexual abuse incident team review at the conclusion of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. A completed report will be submitted to the PREA Coordinator and the Director of Adult Prisons, or designee using the Sexual Abuse or Assault Incident Review Team form (CD-150102.3). The review team includes upper-level management officials, with input from line supervisors, investigators, and medical/mental health practitioners. SNMCF's Incident Review Team includes the Warden; Deputy Warden; Chief of Security; Health Services Administrator; Behavior Health Therapist and the PCM. The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; consider whether the incident or allegation was motivated by race, ethnicity, gender identity, sexual orientation, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. During a review, the team will examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in the area during the different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and prepare a report of its findings on the Sexual Abuse or Assault Incident Review Team form (CD-150102.3). All staff present during the review will sign a PREA Sexual Abuse Response Team Committee Confidentiality Agreement form (CD-150102.4). The facility PCM compiles and documents all PREA incidents on the Monthly PREA Incident Tracking Log form (CD-150102.5). The Confidentiality Agreement form ensures team members understand that the information discussed during the review is not shared with other parties. Of the seven allegations, only one</p>

	<p>case met the criteria for an incident review. The facility provided the completed Sexual Incident Review packet for the Auditor's review which was found to meet all the criteria.</p> <p>Based on analysis and evaluation of the evidence, the agency and facility have demonstrated compliance with all provisions of this standard. Additionally, the agency provides a template for the facility to document the incident review, requires a monthly PREA Incident Tracking Log, and all members must sign the Committee Confidentiality Agreement forms. These procedures are above and beyond the requirements; therefore, the facility and agency exceed the requirements of this standard.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Exceeds Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150100; 2021 & 2022 Annual Agency PREA Report; CD-150100.1 Internal PREA Compliance Assessment Tool form; CD-150100.2 Screening for Risk of Sexual Victimization & Abusiveness form; Website Review; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.87(a)(b): The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions and aggregates the incident-based sexual abuse data at least annually. The PCM collects and compiles monthly data for all incidents reported at their respective facility. The PCM provided the auditor with a copy of the spreadsheet used to track allegations and investigations at the facility.</p> <p>115.87(c): A review of the 2021 and 2022 Annual Agency PREA Report shows that incident-based data collected includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p>115.87(d)(e): A review of the 2021 and 2022 Annual Agency PREA Report shows that the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Additionally, bi-annually in March and September, the Facility PREA Compliance Manager completes the Internal PREA Compliance Assessment Tool, form CD-150100.1 and returns the form to the Agency PREA Coordinator. Also monthly, the Facility Compliance Officer (at Public Facilities) and the Contract Monitor (at Private Facilities), completes the Screening for Risk of Sexual Victimization & Abusiveness, form CD-150100.2 and return the form to the Agency PREA Coordinator. This data collection is above and beyond the requirements of this standard.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. Additionally,</p>

	<p>based on the requirements for facilities to complete bi-annual PREA Compliance Assessment Tool, as well as a monthly completion of the facility's Screening for Risk of Sexual Victimization & Abusiveness form, the facility and agency exceeds provision (d) of this standard.</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed: CD-150101; 2021 & 2022 Agency Annual PREA Report; NM DOC Website; Information Obtained from Interviews.</p> <p>115.88(a)(b): A review of the 2021 and 2022 Agency Annual PREA Reports show that the agency reviews 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; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse. An interview with the agency PREA Coordinator confirmed that PREA allegations, investigations, and evidence collection are compiled into a module in their database. Access to this module is very limited and access is granted after approval of the Inspector General on a need to know basis. With few exceptions, only facility PCMs and the agency PREA Coordinator have access to this module.</p> <p>115.88(c): The agency's annual reports are posted to the agency's public website and are approved by the Commissioner's designee prior to publishing. The reports can be found on the website at https://www.cd.nm.gov/divisions/administrative-support/office-of-inspector-general/prison-rape-elimination-act/. All prior year reports are found on the public website dating back to 2013.</p> <p>115.88(d): Based on an interview with the agency PREA Coordinator and Inspector General, there are no redactions made to the report as names of victims and perpetrators are omitted before the report is published. A review of the report shows that no personal identifiers are included in the public report.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

115.89	Data storage, publication, and destruction
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed: CD-150100; CD-150101; 2021 Agency Annual PREA Report; NMAC Records Retention; Information Obtained from Interviews; Observations During Site Visit.</p> <p>115.89(a): CD-150101 establishes that all case records associated with claims of sexual abuse and sexual harassment, including incident reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are be retained in a confidential manner and are retained for ten years. An interview with the agency PREA Coordinator and Inspector General verified that PREA allegations, investigations, and evidence collection are compiled into a database with limited access. Access to PREA data requires approval from the Inspector General/.</p> <p>115.89(b)(c): The agency’s annual report is readily available to the public through its website: https://www.cd.nm.gov/divisions/administrative-support/office-of-inspector-general/prison-rape-elimination-act/. An interview with the agency PREA Coordinator and Inspector General confirmed there is no information redacted from the aggregated data reports as the victim and perpetrator names are omitted during preparation of the reports. The auditor's review of these reports confirmed they contain no personal identifiers.</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard.</p>

<p>115.401</p>	<p>Frequency and scope of audits</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed: 2021 PREA Audit Report; Website Search; Current and Projected Audit Schedule; Observations During Site Visit; Information Obtained from Interviews.</p> <p>115.401(a)(b): The agency has consistently ensured that its facilities are audited since inception of the PREA and beginning in 2014. The agency's public website contains audit reports for each facility audit conducted since this time. During the third cycle the agency's auditing schedule was interrupted in large part due to the COVID-19 Pandemic. As a result, three of the facilities that were originally scheduled for an audit during the third year of the cycle were pushed back as the previous two years were delayed. SNMCF did have an audit conducted within the cycle in 2020. An interview with the PREA Coordinator confirmed that the COVID-19 Pandemic created exigent circumstances and the agency is back on track to have one-third of</p>

	<p>each facility type operated by the agency or by a private organization on behalf of the agency will be audited at least once during the new cycle. CAP: The PREA Coordinator also provided a projected schedule of audits for the next three years of the fourth cycle for the auditor's review. Based on the projected schedule and interview with the PREA Coordinator, each facility will be audited at a rate of one-third per year, during the current audit cycle.</p> <p>115.401(h): The auditor was provided a complete tour of the facility and surrounding grounds and allowed access to all areas during the initial tour and as requested for follow-up visits to specialized areas.</p> <p>115.401(m): The auditor was provided private space to conduct inmate interviews in various locations around the facility; staff interviews were conducted in the administrative area in a private office.</p> <p>115.401(n): The Audit Notices, in both English and Spanish, were provided to the facility more than six weeks before the on-site audit. These notices were posted by the facility within the required timeframe, and photos of the postings were provided to the auditor by email for verification of posting. Additionally, the auditor observed these notices affixed to the walls or bulletin boards in housing units and other common areas used by both inmates and staff. The audit notice contained contact information for the auditor and notification that the residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel. The Auditor further verified that the inmates and staff interviewed were aware that the Audit Notices were posted timely and that they were able to correspond with the Audit or confidentially. During an interview with the mailroom officer and PCM, the Auditor confirmed that the inmates can correspond with the Auditor in the same manner as if they were communicating with legal counsel. The Auditor received correspondence from three inmates at SNMCF with only one letter addressing PREA-related concerns. The inmate was interviewed and the information was relayed to the facility for review.</p> <p>Based on the review and analysis of the evidence, the facility and agency have demonstrated compliance with all provisions of this standard.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed: Agency's Website Search; Information Obtained from Interviews.</p> <p>115.403(a) The agency posted Final Audit Reports for all of its facilities that were conducted between 2014-present. The PREA Coordinator confirmed having the reports posted to the website falls within her responsibility and she ensures they are posted within 90 days after issued. In addition to the reports being available on the</p>

	<p>website, the agency includes Standard 115.401, Frequency and scope of audits, for user reference during a search which is above and beyond the requirements of this standard.</p>
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Appendix: Provision Findings		
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.)	yes
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	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
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

	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.)	yes
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

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).)	yes
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).)	yes
	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).)	yes
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).)	yes
	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).)	yes
	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).)	yes
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.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
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)?	yes
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	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
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

	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

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	

	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.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
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

	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.)	yes
	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.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	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

	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	

	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

	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

	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

	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.)	yes
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

	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

	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

	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

	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

	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	

	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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
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

	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	

	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,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
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

	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

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

	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?	yes
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

	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

	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

	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

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

	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

	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

	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).	yes
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

	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	

	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.)	yes
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.)	yes
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

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

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.)	yes
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

	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	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	yes
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)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes