

PREA Facility Audit Report: Final

Name of Facility: Central New Mexico Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/15/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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.



Auditor Full Name as Signed: Joy Catrett-Bell

Date of Signature: 10/15/2025

AUDITOR INFORMATION

Auditor name: Catrett-Bell, Joy

Email: jcbell1111@gmail.com

Start Date of On-Site Audit: 09/28/2025

End Date of On-Site Audit: 09/30/2025

FACILITY INFORMATION

Facility name: Central New Mexico Correctional Facility

Facility physical address: 1525 Morris Road, Los Lunas, New Mexico - 87031

Facility mailing address: PO Drawer 1328, Los Lunas, New Mexico - 87031

Primary Contact

Name:	Bernadette Deats
Email Address:	bernadette.deats@cd.nm.gov
Telephone Number:	5053791422

Warden/Jail Administrator/Sheriff/Director	
Name:	Jessica Vigil-Richards
Email Address:	Jessica.vigil3@cd.nm.gov
Telephone Number:	5052702910

Facility PREA Compliance Manager	
Name:	Theresa Silva
Email Address:	theresa.silva@cd.nm.gov
Telephone Number:	505-629-9035
Name:	Bernadette Deats
Email Address:	bernadette.deats@cd.nm.gov
Telephone Number:	(505) 379-1422

Facility Health Service Administrator On-site	
Name:	Dyanne Leyba
Email Address:	dyanne.leyba@wexfordhealth.com
Telephone Number:	5053833544

Facility Characteristics	
Designed facility capacity:	1050
Current population of facility:	953
Average daily population for the past 12 months:	698

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys
In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	19-92
Facility security levels/inmate custody levels:	Level II, Level III, Level V
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	247
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	5

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:	5056702856
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Agency Chief Executive Officer Information:	
Name:	Alisha Tafoya Lucero
Email Address:	Alisha.tafoyalucero@cd.nm.gov
Telephone Number:	575-827-8884

Agency-Wide PREA Coordinator Information			
Name:	Rebecca Hatch	Email Address:	rebecca.hatch@cd.nm.gov

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:	
5	• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.51 - Inmate reporting • 115.53 - Inmate access to outside confidential support services • 115.65 - Coordinated response

Number of standards met:	
40	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-09-28
2. End date of the onsite portion of the audit:	2025-09-30

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?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	VSS Rape Crisis Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1200
15. Average daily population for the past 12 months:	700
16. Number of inmate/resident/detainee housing units:	18
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☒ Yes ☐ No ☐ 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**

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1051
24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	2
25. 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:	93
26. 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:	3
27. 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:	2
28. 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:	1
29. 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:	1

30. 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:	11
31. 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:	2
32. 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:	0
33. 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:	16
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. 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):	The population of inmates meeting the criteria in certain categories was not present.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	276

37. 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:	0
38. 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:	24
39. 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	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	22
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor reviewed the roster and selected inmates based upon the above factors.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. 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):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	49
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".	
46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	1
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2

48. 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:	6
49. 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:	2
50. 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:	8
51. 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
52. 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:	10
53. 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:	2

54. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The population of inmates meeting the criteria in certain categories was not present.
55. 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:	17
56. 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

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The population of inmates meeting the criteria in certain categories was not present.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The Auditor began conducting inmate interviews the first day of the on-site portion of the audit. Based upon the inmate population on day one of the audit, the PREA Auditor Handbook required that the auditor interview a minimum of 40 inmates, (20 random and 20 targeted.) A total of 42 inmate interviews were conducted. All interviews with inmates occurred in a secure area to ensure privacy. Inmate interviews were conducted using the established DOJ interview protocols. If randomly selected inmate refused to be interviewed, an additional inmate from the same housing area would be selected to provide a cross-section review of the entire general population. There were no instances of refusal of selected inmates for interviews.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	13

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Random staff were selected from all shift assignments. There were no barriers in completing interviews.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	16
63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No

65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☒ Yes ☐ No ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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

	☒ Other
If "Other," provide additional specialized staff roles interviewed:	Mailroom Staff, Training Staff, Facility Manager
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.	
71. Did you have access to all areas of the facility?	☒ Yes ☐ No
Was the site review an active, inquiring process that included the following:	
72. 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)?	☒ Yes ☐ No
73. 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)?	☒ Yes ☐ No
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No

75. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No
76. 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 Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of inmates, security rounds, interaction between staff and inmates, shower and toilet areas for inmates, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of staff communication in inmate housing units, search procedures, and availability access to medical and mental health services. The Auditor observed the video monitoring system and camera placement throughout the facility, including reviewing control room monitors.
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.	
77. 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

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

The Auditor conducted a review of employee and inmate files and reviewed documents that were provided to the auditor utilizing the PAQ, including logbooks and other institutional forms. The Auditor reviewed personnel files to determine compliance of standards for hiring, promotion, and background check procedures for officers and contract staff. The Auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new employees, as well as the procedure for annual refresher training. Reviewed inmate files to evaluate intake procedures, including screening, housing assignments, and verification of inmate PREA education. The Auditor requested additional supporting documentation that included training records, inmate records, inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms relevant to hiring and promotions.

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.

79. 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	0	0	0	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	1	0	1	0

80. 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	3	0	3	0
Staff-on-inmate sexual harassment	6	0	6	0
Total	9	0	9	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

83. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	5	1	0
Total	0	5	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

1

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

2

99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

102. 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.

☐ Yes

☒ No

Non-certified Support Staff

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

☒ Yes

☐ No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

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

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

☐ Other

Standards	
Auditor Overall Determination Definitions	
- 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	
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.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100-Offender Protection Against Abuse and Sexual Misconduct CD-150100.D Reporting Procedures NMCD Organizational Charts PREA Compliance Manager's Appointment Memo Job Description (PM) CD-032200 Code of Ethics

	CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA New Mexico policies CD-150100,101,102 outline the facility's approach to implementation of practices covered under the agency PREA policies. NMCD comprehensive PREA policy mandates a zero-tolerance policy for all forms of sexual abuse and harassment. The Agency PREA policy is a document that serves to unify the agency's approach to implementing the PREA standards policy relative to segregation housing, employee training, inmate housing/programming, and health care. The agency's PREA Coordinator oversees and coordinates the efforts of NMCD to comply with Federal PREA Standards including development and implementation of policy, staff training, and inmate education. The PC coordinates the collection of data, and the PREA audit preparation for each five-year cycle required by the standards. Each NMCD facility, including Central New Mexico Correctional Facility(CNMCF), has assigned a PREA Manager with sufficient time and authority to coordinate the facility's efforts to comply with the standards. The PM ensures the facility works to achieve compliance in all areas of the standards and the PC is responsible for monitoring and aiding in areas such as staff training, education, reporting, documentation, and investigation of PREA-related allegations. Conclusion: Based on the Auditor's review of policies, memorandums, facility organizational charts, and staff interviews, the auditor determined that CNMCF exceeds the mandate for this standard.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 Contracting with Other Entities for the Confinement of Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Interview with the PREA Manager CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention PAQ CD-032200 Code of Ethics

	CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA Lea County New Mexico Contract; Otero County Prison Facility Contract Interviews The PC is responsible for reviewing compliance with each NMCD institution and contracting institutions. The PC is responsible for monthly PREA reports, annual reports, investigating all allegations of sexual abuse or sexual harassment, and conducting yearly reviews of facility policy and procedures to ensure PREA compliance. The agency has 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 comply with the PREA standards. 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 perpetual PREA audits, and the facilities are also required to be audited every three years by a certified PREA auditor. Conclusion: Based on staff interviews and document review, CNMCF meets this standard.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.13 Supervision and Monitoring Policy, Materials, Interviews and Other Evidence Reviewed: CD-080100 Institutional Classification, Inmate Risk Assessment and Central Office Classification CD-141100 Protective Custody CD-141500 Restrictive Housing CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA

CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA

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

CD-180200 Behavioral Health Reception and Diagnosis Center (RDC)

CD-180201 Behavioral Health Reception and Diagnosis Center (RDC) (Procedure)

CD-190000 Establishment of the New Mexico Corrections Training Academy Division

Daily Population Roster

Unannounced PREA Rounds

CD-032200 Code of Ethics

CD-037400 Recruitment

CD-037800 Disciplinary Action for Classified Employees

Staffing Plan

Shift Roster

Video Surveillance/Cameras

CD-150100 , Inmate Sexual Abuse/Sexual Harassment Prevention

NMCD policy CD-150100 states that the facility will complete an annual staffing plan and will continue to review at a minimum of once a year. NMCD policy states that all facilities, including contracting facilities, will complete a yearly staffing plan and submit the report for approval. Interviews with the Warden verified compliance with the PREA standard and verified safety and security issues are a primary focus when reviewing staffing plan. The audit included a review of video monitoring, interviews, and staffing rosters.

Policy states the Staffing Plan is maintained by the facility with a copy forwarded to the PC. In circumstances where the Staffing plan has deviations, the facility will document and justify the deviations. The facility accurately documents justifications for deviations with the most common reasons for deviations listed as medical leave, medical transportation, in-service training, vacations, and retirements.

The Auditor observed staff conducting daily rounds to ensure safety and provide inmates the opportunity to access management staff. Staff rounds help to identify any unusual activity, determine security improvements, and correct PREA violations. Staff take necessary action to address any unusual activity or PREA violations. The Warden, Deputy Wardens, and supervisory staff conduct and document PREA rounds, and staff are prohibited from alerting other staff members when these rounds are conducted.

The facility staffing plan is developed with minimum operational staffing levels as a

	guide point. Daily staff rosters were reviewed to ensure adequate staff in accordance with the current staffing plan for critical and non-critical post assignment. Management staff support all efforts to provide adequate staffing levels and make necessary adjustments to comply with the facility's staffing plan requirements. The facility utilizes overtime and draft procedures to fill vacant critical post during a shift. The facility was adequately staffed and provided safety for the facility's population which included inmates with medical or mental health needs, disabled, LGBTIQ, and LEP. The Auditor observed cameras in various areas of the facility and observed formal and informal interactions between staff and inmates. Conclusion: Based on review of the staffing plan, quarterly post assignment schedules, post assignment rosters, interviews, and review of unannounced rounds logs, the Auditor determined the facility meets the mandate for the standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 Youthful Inmates Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy Directive CD-150100, 101,102- Inmate Sexual Abuse/Sexual Harassment Prevention Interviews CD-080100 Institutional Classification, Inmate Risk Assessment and Central Office Classification Memo PAQ The Auditor reviewed CNMCF policy, which stated that youthful inmates will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. The Auditors interviewed staff who stated youthful offenders are housed when necessary and when court ordered. There were two youthful offenders under the age of eighteen housed at CNMCF during the time of the audit. Both had been sentenced and court ordered to be housed at a DOC facility. All youthful offenders are housed separately from the adult population with no sight or sound contact. Any activities

	scheduled for the youthful offenders avoid all contact with the adult population and scheduled accordingly to prevent any visual or physical contact. Conclusion: Interviews with the Warden, PM, and PC confirmed that CNMCF does not house youthful offenders on a routine basis and only housed when court ordered. The Auditor observed that the facility only houses youthful offenders in an area that prevents any interaction with the adult inmate population to include sight or sound. The Auditor determined the facility is compliant with the standard.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.15 Limits to Cross-gender Viewing and Searches. Policy, Materials, Interviews and Other Evidence Reviewed: CD- 150800 Transgender, Intersex, Gender Non-Conforming CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150500 Inmate Grievances CD-150800 Transgender, Intersex, and/or Gender Non-Conforming CD-180200 Behavioral Health Reception and Diagnosis Center (RDC) CD-180201 Behavioral Health Reception and Diagnosis Center (RDC) (Procedure) CD-190000 Establishment of the New Mexico Corrections Training Academy Division Transgender Roster CD - 130300 Searches Conducted in Correctional Facilities CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention Pat Down Search Training Curriculum Training Records- Pat Searches PAQ

Interviews

Policy CD-150100 mandates that cross-gender strip or cross-gender body cavity searches are prohibited except in emergency situations or when performed and documented by a medical practitioner. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances and never for the purpose of determining the inmate's genital status. Correctional staff interviews confirmed that officers have been trained to conduct cross-gender pat searches and receive annual training.

Staff interviews and PAQ did not indicate any cross-gender strip or cross-gender visual body cavity searches of inmates had been performed by correctional or medical staff, at the facility. During interviews with inmates, the Auditor determined there were not any occurrences in which inmates were subjected to cross-gender viewing by staff during a strip search or visual search. Policy states that a licensed physician, physician's assistant, or nurse practitioner must conduct a body cavity search and medical personnel who perform a body cavity search need not be of the same sex as the inmate being searched. However, all other persons who are present during the search will be of the same sex as the inmate being searched.

The facility confirmed that correctional staff have been trained on how to conduct cross-gender pat-searches of transgender and intersex inmates in a professional and respectful manner which is least intrusive. Routine strip searches or visual body cavity searches will occur in authorized areas and searches based on reasonable suspicion require Warden's authorization. Female correctional officers may pat-search inmates of both genders and strip searches are performed exclusively by staff of the same gender. The facility provides training on LGBTIQ searches and body scanning devices and training topics and definitions were found to be consistent with PREA standards. Staff stated during interviews, they received PREA training during orientation and annual training sessions. The Auditor was provided training rosters identifying correctional staff's completion of the required PREA training. Staff interviewed stated that the opposite gender staff must announce their presence when entering the housing unit and the Auditor observed this practice during the tour. Inmates acknowledged that when staff entered the housing units, the opposite gender announcement was made by assigned housing unit officer or by staff entering the unit.

The PM confirmed procedures were developed and implemented that allow inmates to shower, change clothes, and use the bathroom facilities without being viewed by staff of the opposite gender. The Auditor toured the facility and was granted access to all inmate housing units and other support areas. The Auditor observed shower and restroom areas in the facility and confirmed that inmates could shower and use the restroom without staff of the opposite gender seeing them without clothing. All showers are made available to transgender and intersex inmates during times other inmates are not allowed in shower area.

	Conclusion: Based on the review of policies, documents, training rosters, and interviews, the Auditor determined the facility has demonstrated compliance and meets the provisions of this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.16 Inmates with Disabilities and Inmates who are Limited English Proficient Policy, Materials, Interviews and Other Evidence Reviewed: Interviews CD-041000 Inmate Orientation CD Directive CD-150100 Sex Abuse/Sexual Harr. Prevention/Intervention CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150500 Inmate Grievances CD-150800 Transgender, Intersex, and/or Gender Non-Conforming CD-180200 Behavioral Health Reception and Diagnosis Center (RDC) CD-180201 Behavioral Health Reception and Diagnosis Center (RDC) (Procedure) CD-190000 Establishment of the New Mexico Corrections Training Academy Division PREA Brochures English/Spanish Inmate Tablets Language Link Service (Linguistic International) Inmate Orientation Handbook Policy CD-150100 states that inmates with disabilities and inmates who have Limited English will not be discriminated against, and the facility will provide reasonable accommodations to ensure access to programs, and activities, in accordance with the Americans with Disabilities Act. The policy states the facility will take steps to

	ensure that inmates with disabilities, including those who are deaf, blind or have intellectual limitations, have an equal opportunity to participate, and benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and harassment. CNMCF policy is written in accordance with Standard 115.16 and states that the PM is responsible for development and distribution of PREA educational materials for inmates. PREA information regarding the agency's zero tolerance for sexual abuse and sexual harassment of inmates include, how to report and inmates' right to be free from retaliation for reporting or participating in a related investigation. Educational materials also include information on treatment, advocacy, counseling services, and signage is posted throughout the facility. CNMCF directives state that the facility will provide PREA education to inmates in formats understandable by the entire inmate population and if needed, the facility will seek the assistance of Interpreters. Inmate reader assistants will only be utilized in limited circumstances where an extended delay in obtaining a contracted interpreter could compromise the inmate's safety. The agency provides a PREA brochure in Spanish, as well as publishing their inmate handbooks in Spanish. The Warden confirmed that the agency is taking steps to ensure that materials are provided in various formats to include PREA video and information accessible through the inmate tablets. Signage displaying PREA reporting information was observed in housing units both in English and Spanish. The Auditor verified a translation service provided interpretation services to aid LEP inmates and each inmate entering the facility is provided a written copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment within 30 days of arriving at the facility. Inmates are required to sign as verification of receipt of the inmate handbook and PREA education. Conclusion: The Auditor reviewed the Agency's policies, procedures, Inmate Handbook, Zero Tolerance for Sexual Abuse and Sexual Harassment handout, interpretive services contracts, and training records. The Auditor determined the facility exceeds the requirements of this standard.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.17 Hiring and Promotion decisions Policy, Materials, Interviews and Other Evidence Reviewed: Employee Handbook

CD-030200 Recruitment Selection and Hire of Correctional Officers

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-031801 Office of Professional Standards (OPS) Personnel Investigations and Staff Misconduct Reporting (Procedures)

CD-190000 Establishment of the New Mexico Corrections Training

CD-031802 Polygraph Testing

CD-032200 Code of Ethics

CD-037400 Recruitment

CD-037800 Disciplinary Action for Classified Employees

Contractor Roster

CD-025100 Contractor Records/Contracts

Policy CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention

NMCD-060200 Citizen involvement and Volunteers

Employment Application

Staff Promotions

Interviews

PAQ

NCIC Form

Background Information Request

Information Waiver Form

Policy 150100 requires all employees, contractors, and volunteers to have criminal background checks completed prior to employment. Policy states that the facility will not knowingly hire any new employee, promote any existing employee, or enlist the services of any contractor who has contact with inmates that have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or institution. Been convicted of engaging in, attempting to engage in or conspiracy to engage in sexual activity facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse. Been civilly or administratively resolved to having engaged in the activity described above.

	The policy requires that once every five years criminal history checks are processed for CNMCF employees and annually for contract staff. The facility can authorize an NCIC check at any time within the 5-year period if requested. The five-year criminal history checks will be completed and will be documented to include a review for personal protection orders and domestic violence offenses. Any information produced from the criminal history check that has not been previously reported or investigated will be referred to OPM staff for investigation. Checks are conducted on all staff and include criminal background checks through the NMCD Human Resource division. Volunteers and Contractors who have contact with inmates at the facility will have an annual criminal history check processed and any information discovered that has not been previously reported or investigated will be referred for investigation. The facility does not hire any staff that have engaged in sexual abuse or harassment as stipulated in the standard. CNMCF requires that all applicants who apply for positions complete the employment application packet which includes a PREA questionnaire form. If any of the PREA questions are affirmed by the applicant, the application process is paused, and the applicant will be ineligible for employment if an abuse is confirmed. The application also contains a statement that must be acknowledged by the applicant stating they understand that any false information provided on the application could result in termination or prosecution. Any instances of sexual harassment are used in determining whether to hire or promote applicants or enlist the services of contractors who may have contact with inmates. Each newly hired staff member and contractor will undergo a background check and is not offered employment if there is disqualifying information discovered. The Auditor concluded the facility is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring or promoting staff and enlisting the services of contractors. Conclusion: The Auditor conducted a review of the agency's policies, procedures, employee records, contractor records, background investigations, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18 Upgrades to Facilities and Technologies Policy, Materials, Interviews and Other Evidence Reviewed: Policy Directive CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and

	Intervention Facility Camera Placement Interviews NMCD Policy-150100 states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the effect of the design, acquisition, expansion, modification, and the facility's ability to protect inmates from sexual abuse, will be considered. When installing or upgrading the video monitoring system, electronic surveillance system, or other monitoring technology, the ability to protect inmates from sexual abuse will be carefully reviewed. During interviews with the agency PREA coordinator and facility PM, it was determined that facility management staff and the PM would discuss all projects at the facility prior to a start date to ensure compliance with the PREA standards are appropriately addressed. The Warden and PM stated that when installing or updating the camera system, electronic surveillance system, or other monitoring technology, the facility considers how the installations will increase their ability to protect inmates from sexual abuse. Facility staff monitor institutional cameras to ensure they are operating effectively and to identify any areas that may need additional coverage. Conclusion: The Auditor determined that the facility meets the provisions of this standard.
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 Evidence Protocol and Forensic Medical Examinations Policy, Materials, Interviews and Other Evidence Reviewed: Policy Directive CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention CD-031800 OPS Personnel Investigations and Misconduct CD-150101 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150102 Offender Protection Against Abuse; Sexual Misconduct, Reporting Procedures, PREA CD-150500 Inmate Grievances CD-150800 Transgender, Intersex, and/or Gender Non-Conforming

	CD-180200 Behavioral Health Reception and Diagnosis Center (RDC) CD-180201 Behavioral Health Reception and Diagnosis Center (RDC) (Procedure) Investigator Training NMCD Policy CD 170100 Medical Clinical Services Sexual Assault Brochures PREA Investigation Checklist MOU New Mexico State Police (NMSP) Standard 115.21 Evidence Protocol and Forensic Medical Examinations states that administrative and criminal investigations are completed for all allegations of sexual abuse or sexual harassment. CNMCF policy states that investigations of sexual abuse will be completed by staff who have received specialized investigator training as outlined in the NMCD policy. PREA investigations will be conducted promptly, thoroughly, and objectively in accordance with investigation protocol. Facility trained investigators conduct administrative investigations for allegations that may be administrative and the NMSP conduct investigations that appear of a criminal nature with possible prosecutions. The PM serves as an investigative liaison between the NMSP and facility. Facility Investigators are trained using the Crime Scene Management and Preservation training modules and the facility provided documentation of the training. The training included material reference and sources from the U.S. Department of Justice's office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, PREA Audit Reporting, Crime Scene Management/Preservation, and NIC training. CNMCF has a MOU Valencia Shelter Services for emotional support services and inmates are made aware of the support services available to them. They receive PREA information thru inmate handbook, iPad tablet, and PREA signage in both English and Spanish displayed throughout the facility. A victim advocate from the Valencia Shelter Rape Crisis Center will be available to accompany and support the victim through the forensic medical examination process, investigatory interviews, emotional support, crisis intervention, and referrals process. CNMCF does not employ SAFE or SANE staff and forensic examinations are provided by the local clinic. There were no forensic examinations conducted during the past 12 months. Conclusion: Interviews with staff and review of supporting documentation confirmed compliance with this standard. The Auditor determined that the facility meets the requirements of this standard.
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 Policy to ensure Referrals of Allegations for Investigations Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment PREA Investigation Checklist Investigation Packets New Mexico State Police Memo NMCD Policy CD 031800 OPS Personnel Investigations and Staff Misconduct Reporting NMCD PREA Hotline Interviews CNMCF policy is written in accordance with Standard 115.22 and requires that an investigation be completed for allegations of sexual abuse and harassment. The Warden is responsible for ensuring the information on allegations of inmate-on-inmate sexual abuse/sexual harassment, employee sexual abuse/sexual harassment, or employee overfamiliarity accusations, are entered into the NMCD database and promptly investigated. Policy also dictates that allegations are referred for a criminal investigation, if warranted. Investigators track sexual abuse and sexual harassment investigations. An investigation worksheet is completed for cases reported verbally, in writing, anonymously, or from third parties. The Warden will refer the allegation as soon as possible, but no later than one business day after the report was made. The facility utilizes documentation to ensure required steps of the investigation process are completed and documented timely. The information tracked includes the date of the allegation, name of the victim/perpetrator, RHU placement/reviews, initiate after-action review, investigation outcome, inmate outcome notification, and retaliation monitoring review. A review of training documents confirmed that investigators received specialized training instruction in conducting sexual assault investigations in prisons. The facility PM, supervisors, and investigators work closely to ensure that allegations of sexual abuse and harassment are investigated promptly and thoroughly. If an inmate alleges a sexual assault or sexual harassment has taken place, the staff member will notify their supervisor, who initiates the initial report. The supervisor will complete the PREA First Responder checklist and complete the investigation packet, which will be forwarded to the PM for review. The investigator coordinates as needed with the PM to determine the course of action and the PC is notified. The NMSP conducts all criminal investigations for the facility and will be notified if there are

	suspected potential criminal charges. If the case is prosecutable, a referral for prosecutorial efforts will be made. Conclusion: The Auditor reviewed investigative files, conducted interviews, and observed daily assignments at CNMCF. The Auditor determined the facility meets the provisions of this standard.
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 Employee Training Policy, Materials, Interviews and Other Evidence Reviewed: NMCD – Policy CD-150100, Sexual Harassment Prevention and Intervention CD-031000-Correctional Officer Training and Staff Development Requirements PREA New Hire Training Lesson Plan Monthly Incident PREA Tracking (Form 150102.5) CD-032200 Code of Ethics. NMCD Policy CD 150800 Transgender, Intersex, Gender Nonconforming NMCD Policy CD-130300 Search Policy Training and Staff Development Initial Orientation Staff Training Roster Annual Inservice PREA Acknowledgment Pre-Audit Questionnaire Staff Interviews Annual Refresher Training Packet NMCD requires that facility employees, student assistants, unpaid student interns, and contractors be required to successfully complete service training in accordance with the requirements set forth in policy. In accordance with the PREA policy, employees are required to complete PREA training each year and is conducted

	annually at the facility to aid in fulfillment of annual training requirements. The curriculum offered allows the employees to remain current on policies and procedures regarding sexual abuse and harassment. The training includes various courses and course acknowledgment documentation in order to fulfill the requirements of the standard. The Auditor was provided copies of the facility's PREA curriculum, access to training rosters, employees' certificates of completion, and training acknowledgement forms Conclusion: The Auditor determined the facility meets the requirements of this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 Volunteer and Contractor Training Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Sexual Harassment Prevention and Intervention Volunteer Training Acknowledgement Forms NMCD Contractor Packet Volunteer Handbook CD 060200 Citizen Involvement and Volunteers Staff Interviews Medical Staff PREA Acknowledgement PAQ CNMCF provides standardized training for all new employees, contractors, vendors, student interns, and volunteers who provide services at facilities. Vendors who have contact with inmates will have direct continuous supervision by facility staff. They are required to review the PREA training modules and provide a signature as an understanding of requirements set forth by the PREA standards. The Auditor reviewed the training curriculum, training rosters and random training files and verified contracted employees and volunteers have received the required PREA training. Newly hired contractors and appointed volunteers are provided PREA training during their initial orientation before being allowed access to the facility and population. All volunteers and contractors who have contact with inmates, have been

	trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and staff response to sexual abuse or sexual harassment. The specialized training provided to volunteers and contractors teaches specific requirements for inclusion of a diverse population that include females, transgender, and intersex inmates. The facility ensures all training authorized is completed timely, documented accurately, and implemented accordingly. The facility has prepared an itemized training packet that is utilized for contractors and volunteers prior to assignments. Interviews with contract staff verified they were provided training information about respectful interactions with transgender inmates, physical boundaries, and overfamiliarity with inmates. Interviews with contractors verified they were aware of their responsibilities to report incidences of sexual abuse and sexual harassment, as well as how to respond as a first responder to preserve potential evidence and to whom to report. The facility's training curriculum for contractors and volunteers sufficiently addresses the concepts of sexual abuse, sexual harassment, reporting, and response procedures. Conclusion: The Auditor concluded the facility is appropriately training volunteers, contractors, and staff, to ensure documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum, acknowledgment forms, and interviews, that the facility meets the requirements of this standard.
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.33 Inmate Education Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy CD-150100, Sexual Harassment Prevention and Intervention PAQ Policy CD-014100 Inmate Orientation Inmate Orientation Verification Signature Form Interviews Linguistics Language line Inc

PREA Education Pamphlets

Inmate PREA Handbook (English and Spanish)

PREA Posters (English and Spanish)

Inmate Training Records

Inmate File Review

CNMCF policy is written in accordance with Standard 115.33 and states all inmates will receive comprehensive PREA education during intake and when transferred from another facility and within 30 days of arrival at the new facility. Upon 72 hours of arrival at a facility, an inmate will receive educational material on Sexual Abuse Zero tolerance, how to report, PREA manager contact information, third party reporting, victim advocate services contact information, and emotional support services contact information. In accordance with policy, inmates will receive orientation upon arrival at the CNMCF facility, and the Warden will develop and maintain an orientation program for admitted inmates.

During intake processing, inmates receive comprehensive PREA information explaining the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Inmates also receive information on how to report incidents or suspicions of sexual abuse. This information is provided in writing and video presentation. Topics covered during inmate education include Inmates' rights to be free from sexual abuse and sexual harassment, retaliation for reporting such incidents, available methods to report incidents, agency PREA policies, and procedures for reporting.

Interviews verified PREA training is provided during inmate intake to inmates by classification staff or other unit management staff. Staff provide inmates PREAS brochure referencing the Zero-tolerance policy, definitions of sexual abuse /retaliation, how to report sexual abuse, process required following a report, available services to victims, and sexual abuse avoidance.

During intake processing, classification staff are required to create a file review to ensure that each inmate receives PREA education and documented. The Auditor reviewed inmate files and transfer records to verify PREA education was provided in a timely manner. As part of the facility's intake and receptions procedures, each new inmate reception file is reviewed for a signed receipt for PREA training. The facility utilizes language line service to assist in providing PREA information to disabled or LEP inmates. The facility maintains copies of PREA training materials, the PREA Resource Center's "An End to Silence", and PREA publications.

The NMCD publishes written educational materials that include the PREA brochure, PREA posters, and Inmates Handbook in English and Spanish, and closed captioned PREA video for LEP, deaf, or hard of hearing population. During a tour of the facility, "Zero Tolerance" posters were visible throughout the housing units, common areas of the facility, and medical. The Auditor observed the efforts of the facility to actively advertise and promote PREA resources.

	Conclusion: The Auditor determined the facility meets the requirements of this standard.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.34 Specialized Training: Investigations Policy, Materials, Interviews and Other Evidence Reviewed: Investigator Training Certificates NMCD- Policy CD-150100, Sexual Harassment Prevention and Intervention NIC Certifications Investigation Packets CD-031800 OPS Personnel Investigations and Staff Misconduct Reporting Basic Investigator Training Interviews PAQ CNMCF policy is written in accordance with PREA standard 115.34. Policy states that investigations of sexual abuse or sexual harassment will be completed by employees who have received specialized investigator training as outlined in the policy. Investigations will be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment investigations portion of the PREA policy and PREA standards. The policy stipulates that facility investigators are required to receive specialized training to conduct sexual abuse investigations in confinement settings. The facility has trained investigators who have completed the required PREA training and continue to further their knowledge of institutional investigating practices. Specialized training includes, “Investigations in Confinement Settings”, techniques for interviewing sexual abuse victims, Miranda and Garrity warnings, sexual abuse evidence collection, and prosecution evidence referral. The facility utilizes the investigator training manual which provides specialized training to investigators. This investigative course covers PREA topics that include, Dynamics of sexual abuse within confinement settings, Interview techniques for victims of sexual abuse, preservation of evidence, Employee rights, and Garrity and Miranda statements. The training provides guidance on the requirements and

	procedures during referral of potential PREA cases for criminal investigation and prosecution. The Auditor verified electronic documentation of investigator training in the employee's training file. Conclusion: The Auditor concluded the facility has provided specialized training for investigators that include investigative techniques. The Auditor conducted a review of policies, training curriculum, training records, investigative reports, and conducted interviews with investigators to determine the facility meets the requirements of this standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.35 Specialized Training: Medical and Mental Health Care Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy CD-150100, Sexual Harassment Prevention and Intervention Staff Training Roster Credentials for Health Service Staff Medical In-service Training PREA Acknowledgement Health Care and Mental Health Training Valencia Shelter Services MOU Interviews PAQ NMCD policy requires that all staff members receive PREA training in accordance with Standard 115.31. The policy requires that part-time and full-time mental health and medical staff members receive additional specialized training. Student assistants, unpaid student interns, Agency employees, and contractual employees are required to successfully complete in-service training in accordance with the requirements in policy. The Auditor reviewed the facility training curriculum specific to medical and mental health staff. Training materials cover the detection of sexual abuse and harassment, preservation of evidence specific to facility responsibility, how to respond to victims of sexual abuse, and facility reporting responsibilities for allegations of sexual abuse

	and sexual harassment. Medical and mental health practitioners practicing at CNMCF receive training beyond the standard's requirements by their contracting firm. NMCD PREA policy establishes procedures for ensuring facility employees and contract staff are adequately trained based on their positions within the facility. The facility provided training documentation for medical and mental health staff related to their specialized departments. During interviews with medical and mental health staff, the Auditor confirmed staff received computer-based training relevant to PREA standard requirements. The Auditor interviewed medical and mental health supervisors who were knowledgeable of the training offered and confirmed having received the general and specialized training during part of their hiring protocol and annually at in-service. A review of their training documentation verified that training has been provided. Conclusion: Based on review of the agency's policy, inmate records, and staff interviews, the Auditor determined the facility meets the requirements of this standard.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41 Screening for Risk of Victimization and Abusiveness Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention HRSA/HRSV List SRNS (Sexual Risk Needs Screening) Inmate Admissions, Transfers and Discharge Roster Intake Screening Instrument Policy CD 040101 Inmate Records Policy CD 04000 Information Technology CD-150800 Transgender Inmates PAQ

Medical Referrals

Risk Assessment

30 Day Review

Interviews

CNMCF policy states that a transferred inmate will receive an initial screening within 72 hours of arrival at the receiving facility to identify any history of sexually aggressive behavior and to assess the inmate's risk of sexual victimization. Staff will complete the PREA risk assessments in accordance with the standard. The PREA standard states that all inmates should be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates. Risk assessment tools are utilized to determine an inmate's risk, and the assessment is completed using information contained in the inmate's file, databases, and inmate interview. The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. Inmates being assessed during the intake process and interviewed will not be disciplined for refusing to answer any interview questions.

Staff interviewed by the Auditor explained the initial intake Risk screening process used during inmate arrival at the facility. Interviews with staff verified that within 72 hours of admission, inmates are screened for risk of sexual abuse victimization and the potential for predatory behavior. If necessary, staff will submit a medical referral to the medical department. The facility utilizes an SRNS- PREA form to document each inmate assessment and submit it into the electronic tracking system. During interviews with inmates, they stated they were asked PREA related questions during intake orientation.

Interviews with inmates confirmed that they were screened within 72 hours of their intake and review of random inmates' files supports initial screening within 48 hours, psychological screening, and reassessment within 30 days from the date of arrival. An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information of an inmate's risk of sexual victimization or abusiveness. The PM stated that a reassessment is completed any time there is an incident and/or based on a referral from a staff member, medical request, or incident of sexual assault. During the initial assessment screening, staff perception of the inmate is documented, and the inmates are asked about their sexual orientation. Staff meet with inmates to conduct the reassessment, and inmates are not disciplined for refusing to answer, or not disclosing complete information in response to questions. Any refusal by the inmates is documented in accordance with policies.

The Auditors interviewed classification staff who completed the screenings, and they stated the risk screening is completed within 48 hours and medical referrals are made if required. The Auditor reviewed inmate files, intake records, and risk screenings to confirm screenings within 72 hours of intake were documented. The

	staff responsible for risk screening confirmed that 30-day reassessments are being completed prior to the 30-day requirement. Conclusion: The Auditor conducted a thorough review of policies, procedures, inmate records, made observations, interviewed staff and inmates, to determine the facility meets the requirements of this standard.
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 Use of Screening Information Policy, Materials, Interviews and Other Evidence Reviewed: Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention SRNS Form Transgender-Intersex Bi-Annual Reviews PAQ CD-150800 Transgender Inmates Policy CD-080102 Institutional Classification Inmate Housing Assignments Classification Procedure The Auditor reviewed inmate classification records for inmates that determined housing placements, programming opportunities, work assignments, and other assignments to ensure each inmate is housed safely while at the facility. Staff utilized information obtained during the risk screening to assign facility housing, cell, and work assignments and ensure HRSV inmates are protected. Classification staff enter screening information into the facility CMIS (Criminal Management Inmate System) to identify inmates at risk of victimization(HRSV) to ensure they are not placed in a work or education assignment with those identified as potential abusers(HRSA). The Auditor verified that staff conduct risk screenings on each inmate during the initial intake screening and consider an inmate's own perceptions of their safety before making classification decisions. The screening tool includes sections for the staff to document his/her own perceptions of the inmate. The Auditor conducted interviews with inmates who identified as gay or bisexual and each confirmed they

	had not been housed in a unit that is designated for LGBTIQ inmates. The Auditor toured housing units in the facility and observed inmates living areas which provided an area to shower, change clothes, and use the restroom without staff of the opposite gender seeing them without clothing. Transgender and intersex inmates are allowed to shower separately from other inmates when the showers are closed to the inmate population. Interviews with facility staff indicate that placement of any transgender or intersex inmates are to be made on a case-by-case determination and staff are aware of their responsibilities. Agency policy stipulate that placement and programming assignments for transgender inmates will be reassessed at least twice a year to review any threats to safety and their views with respect to his or her safety will be given serious consideration. Staff assigned to conduct the transgender review utilize a tracking system to ensure each is reassessed twice a year. The Auditor reviewed inmates' housing rosters and concluded LGBTIQ inmates were not placed in isolated units and are housed in different units, buildings, wings, and cells throughout the facility. CNMCF was not under a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates. Conclusion: The Auditor reviewed policies, procedures, inmate records, made observations, and conducted interviews to determine the facility meets the requirements of this standard.
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.43 Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy-150100, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention PREA Tracker Restrictive Housing Weekly Report Unit Classification Procedure CD 141100 Protective Custody

	Risk and Abusiveness Screening NMCD Policy-141500 Restrictive Housing Inmate Housing Assignments Interviews CNMCF policy state that inmates at high risk for sexual victimization or who are alleged to have suffered sexual abuse will not be placed in involuntary temporary segregation unless an assessment of all available alternatives is conducted, and a determination has been made that no less restrictive means of separation from likely abusers exist. If the review cannot be conducted immediately, the inmate may be held in temporary segregation for up to 24 hours while the review is completed. If no less restrictive means of separation exist, the inmate will be assigned to temporary segregation for a period not to ordinarily exceed thirty calendar days. The facility takes adequate measures to ensure individualized inmate safety needs are considered when making any inmate assignments. The facility reported that there were no instances of inmates being placed into involuntary segregation for risk of victimization. The Warden stated that segregation is not used to protect inmates at high risk of sexual victimization unless it is the only means of keeping an individual safe. Such placement is limited to a brief period which would be less than 24 hours and until the inmate can be reviewed by classification staff for appropriate housing within the facility or transfer to a different correctional facility. Facility inmates in the RHU maintain access to recreation, educational programming, and religious services to the extent administratively feasible and can be safely afforded the opportunity. In the event of restrictions, the facility is required to document the nature of the restrictions. Staff are trained on the NMCD policy and their responsibilities regarding this standard and staff interviewed stated they would assess available housing alternatives prior to placing an inmate in the restrictive housing unit. Staff are required to assess and document all available alternatives. Staff stated that an inmate identified as high risk would be moved to another housing location and not placed in segregation unless it was a temporary placement to keep the inmate safe until the investigation was complete, or if the inmate requested protective custody. The PREA manager verified there were no inmates during the audit period that had been placed in restrictive housing involuntarily to separate them from potential abusers. Conclusion: The Auditor reviewed policies, procedures, Sexual Abuse/Sexual Harassment available alternatives, risk assessment forms, made observations, and conducted interviews. The Auditor determined the facility has demonstrated compliance with the provisions and meets this standard.
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115.51	Inmate reporting
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	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.51 Inmate Reporting Policy, Materials, Interviews and Other Evidence Reviewed: MOU Colorado External Party PREA Reporting (CDOC.colorado.gov) NMCD Policy CD-150100 Inmate Sexual/Abuse Harassment Prevention Inmate Orientation Handbook PREA Signage Interviews Staff Response Guide Grievance Form PREA standard 115.51 states facilities must provide multiple avenues for inmates to privately report sexual abuse, harassment, retaliation, and if there is staff neglect or violation of responsibilities. The directive designates multiple mechanisms for internal reporting of sexual abuse and harassment, retaliation by other inmates or staff, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse. NMCD PREA policy states that inmates may anonymously report sexual abuse, sexual harassment, retaliation by other inmates or staff, and staff neglect or dereliction of duty that may have contributed to such incidents. Inmates can file claims through verbal or written reports to any staff member, organization, or via third parties. The inmate grievance form is one way in which inmates can privately report sexual abuse and sexual harassment, retaliation, and staff neglect. Inmates are not required to resolve an incident of sexual abuse or sexual harassment with staff or submit the grievance to the staff member who is the subject of their allegation. Grievances regarding sexual abuse or sexual harassment will not be referred to the staff member who is the subject of the grievance and the inmate will not be charged for filing a grievance regarding sexual abuse or sexual harassment unless it is determined that it was filed in bad faith. Staff will promptly document and forward to designated supervisory staff for investigation when receiving any report of sexual abuse or sexual harassment, regardless of the source. Staff interviewed were aware of their obligations to accept and forward all reports from inmates and were aware of the responsibilities documenting each written report. Staff may confidentially report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or directly to their warden. Staff can also report sexual abuse or harassment through the NMCD

	website (www.cd.nm.gov), and staff members are informed of these reporting avenues during annual institutional PREA training. Staff stated during interviews that they are aware they can contact any facility executive level employee, PREA manager, or PREA coordinator, to report sexual abuse or harassment of inmates. Third party reporting posters and the employee handbook provides information to employees of their responsibility to report sexual abuse or sexual harassment. Staff are provided information referencing the PREA hotline number and website address for anonymous reporting. Staff interviewed knew how to privately report sexual abuse and harassment. Inmates interviewed stated they felt comfortable talking with staff if they had a PREA issue. Inmates expressed that they felt safe and were aware of PREA contact information in the housing units, dining hall, and other shared areas. CNMCF provides inmates a third-party line for Advocate services and contact information for reporting to the Colorado Department of Corrections. Inmates at the facility are not detained solely for civil immigration purposes. Conclusion: The Auditor reviewed the agency's policies, procedures, inmate handbook, grievances, investigative records, and conducted interviews with staff and inmates to determine the facility exceeds the requirements of this standard.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.52 Exhaustion of Administrative Remedies Policy, Materials, Interviews and Other Evidence Reviewed: PAQ CD 150500 Inmate Grievance Interviews CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Inmate Handbook NMCD policy state that the facility has a grievance procedure in place for addressing inmate grievances regarding sexual abuse. The directive states that inmates are not required to use an informal grievance process to resolve an alleged incident of sexual abuse and are not required to submit a grievance to a staff member who is the subject of a complaint. The inmate can submit a grievance form and all PREA related reports are immediately processed and referred. The Inmate Administrative Remedies

	procedure provides a way for inmates to obtain a formal disposition of an issue or a problem from management staff. Facility staff understood the procedures for submitting emergency grievances and supervisors were aware of the time limits in response to an emergency grievance alleging an imminent risk of sexual abuse. Conclusions: Based upon the review of documentation and interviews, the Auditor has determined the facility meets the provisions of the standard.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.53 Inmate Access to Outside Confidential Support Services Policy, Materials, Interviews and Other Evidence Reviewed: Inmate Handbook CD 100701 Monitoring Form PREA Posters NMCD Policy-150300 Inmate Access to Telephones NMCD Policy- 151200 Correspondence Regulations Interviews Valencia Shelter Services Acknowledgement Receipt I-PAD Tablet CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention NMCD policy states that CNMCF provides inmates with access to outside victim advocates for emotional support services for sexual abuse. The facility has established a MOU Valencia Rape Crisis Center for their affiliated services. CNMCF provides contact information for inmates to notify the CDOC by mail for support services. The Auditor determined the agency and facility work collaboratively to establish relationships with outside support services. The facility provides contact information of PREA resources on inmate bulletin boards located in the housing units and adjourning common areas. Inmates are made aware that communications are monitored, and which lines of communication are not monitored for confidential purposes. Signs posted in the inmate housing units include

	advisories that the calls may be anonymous and will not be monitored. Agency policy requires that inmates and staff be allowed to report sexual abuse or harassment confidentially and that medical and mental health personnel inform inmates of their limits of confidentiality. Interviews with medical and mental health staff confirmed staff are aware of their obligations to inform the inmates of the limits of confidentiality. There were posters located throughout the medical and mental health areas with PREA contact information provided. Inmates are informed of the services during the initial intake process, and the facility provides inmates written information regarding confidential PREA support services during orientation and on their tablets. Conclusion: Based on policy review, interviews, and correspondence review, the facility exceeds the requirements of this standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard Auditor Discussion 115.54 Third-party Reporting Policy, Materials, Interviews and Other Evidence Reviewed: PREA Investigation Hotline: 505-883-8020 NMCD Policy-150500 Inmate Grievances NMCD CD Policy-151200 Correspondence Regulations Interviews Inmate Handbook PREA Signage CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention NMCD policy-150100 and CNMCF website provide avenues that meet the requirements of PREA standard 115.54. The Auditor reviewed the NMCD policy which state that inmates may report allegations of prohibited conduct and retaliation can be reported verbally or in writing to any facility staff member, the Sexual Abuse Hotline, PREA hotline, or third-party avenues. The NMCD website, facility notices, and CNMCF inmate handbook, provide inmates with contact information for reporting any PREA violations. The NMCD website assists third parties in reporting allegations of sexual abuse or harassment on the inmate's behalf. The inmates interviewed by the Auditor stated

	they were aware of third-party reporting methods and felt more comfortable reporting an incident of sexual abuse to someone outside the facility. Third parties can also use the NMCD website to report PREA allegations electronically on behalf of inmates. The facility provided in the questionnaire that the agency publicly distributes information on how to report inmate sexual abuse or harassment on behalf of inmates. Policies reviewed confirmed that third parties, inmates, staff members, family members, attorneys, and outside advocates will be permitted to assist in reporting on an inmate's behalf. The agency website states that all allegations of sexual abuse should be reported and will be investigated. Third parties can report by contacting the PREA Sexual Abuse Hotline, at 505-827-8524, (#88), or through written correspondence. Conclusion: The Auditor reviewed materials, policies, and made observations during the facility tour and determined the facility meets requirements for the standard.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 Agency Protection Duties Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Memo SIR Report(Serious Incident Report) Incident Review CD 141100 Protective Custody Specialized Medical training Interviews Facility Response to Sexual Assault Checklist Investigations PAQ NMCD policy is written in compliance with Standard 115.62 which requires that whenever there is a report of an incident of sexual abuse or harassment, the victim

	should be immediately protected. The Auditor reviewed the facility policy which stated that when an inmate is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse, the facility will take immediate action to protect the inmate by ensuring no contact between the alleged abuser and the alleged victim. Such actions can include housing changes, work assignment, temporary segregation, reassignment, and transfers. Staff interviewed by the Auditor were able to articulate requirements regarding what immediate actions were required if staff learned an inmate was at imminent risk of sexual abuse. Supervisory staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates which included relocating the inmate to a different housing unit at the assigned facility or transferring the inmate to another facility. Each decision on reassignments would be determined on a case-by-case basis analysis. The Warden is required to review the proposed actions within 48 hours to ensure appropriate measures have been taken to protect potential victims. PREA directives require medical and mental health staff to immediately contact the Warden and recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk. If medical staff determine during an assessment that an inmate is at risk of imminent sexual abuse or is considered at risk sexual victimization, they will collaborate closely with the Warden and classification staff to provide alternative housing placement. Conclusion: The Auditor reviewed policies, procedures, investigative records, conducted interviews with staff and inmates, made observations, and determined the facility meets the requirements of this standard.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 Agency Protection Duties Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Memo SIR Report(Serious Incident Report) Incident Review CD 141100 Protective Custody Specialized Medical training

	Interviews Facility Response to Sexual Assault Checklist Investigations PAQ NMCD policy is written in compliance with Standard 115.62 which requires that whenever there is a report of an incident of sexual abuse or harassment, the victim should be immediately protected. The Auditor reviewed the facility policy which stated that when an inmate is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse, the facility will take immediate action to protect the inmate by ensuring no contact between the alleged abuser and the alleged victim. Such actions can include housing changes, work assignment, temporary segregation, reassignment, and transfers. Staff interviewed by the Auditor were able to articulate requirements regarding what immediate actions were required if staff learned an inmate was at imminent risk of sexual abuse. Supervisory staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates which included relocating the inmate to a different housing unit at the assigned facility or transferring the inmate to another facility. Each decision on reassignments would be determined on a case-by-case basis analysis. The Warden is required to review the proposed actions within 48 hours to ensure appropriate measures have been taken to protect potential victims. PREA directives require medical and mental health staff to immediately contact the Warden and recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk. If medical staff determine during an assessment that an inmate is at risk of imminent sexual abuse or is considered at risk sexual victimization, they will collaborate closely with the Warden and classification staff to provide alternative housing placement. Conclusion: The Auditor reviewed policies, procedures, investigative records, conducted interviews with staff and inmates, made observations, and determined the facility meets the requirements of this standard.
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.63 Reporting to other Confinement Facilities Policy, Materials, Interviews and Other Evidence Reviewed: Screening Instrument

	Email of Notification Warden Memo Facility Response to Sexual Assault Checklist Interviews CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention PAQ When a PREA allegation is received at any location other than a correctional facility, it will be reported using contact information located on the Agency website. This includes any allegation received regarding sexual abuse and sexual harassment at a jail, State correctional facility, Federal prison, or a Juvenile detention facility and any documents related to the allegation must be made available to the PREA manager for review. NMCD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, mandates that when receiving an allegation that an inmate was sexually abused while confined at another facility, the incident will be reported to the PM. The Warden will notify the agency or facility head where the abuse is alleged to have occurred within 72 hours of receiving the allegation. The PM will maintain documentation of the notification and include all actions taken regarding the incident and forwarded to the PREA Coordinator. The Auditor conducted interviews with facility staff concerning actions they would take if an inmate alleges sexual abuse while confined at another facility. Staff stated they would immediately report the allegation to their supervisor and submit an incident report including the details of the allegation as reported to them by the inmate. The Warden and PM stated that if they receive such a notice, they will immediately report the allegation to the Warden at facility affected and document. The Warden stated that if an inmate alleges sexual abuse at another facility, they will place a telephone call followed by an email to Warden at the facility of the allegation to complete the notification process. The Warden stated they would conduct an investigation immediately. Conclusion: Compliance with this standard was verified by reviewing policies, interviews with investigators, PREA compliance manager, and Warden. The Auditor determined that the facility meets the requirements of this standard.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.64 Staff First Responder Duties

Policy, Materials, Interviews and Other Evidence Reviewed:

CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

Staff Response Guide

Sexual Assault Checklist

SIR Packet

Staff training

PREA Lesson Plan

Coordinated Response Plan

Investigator Training

Interviews

CNMCF policy requires that if the first responder is not a correctional staff member, they immediately notify a correctional staff member. The Auditor conducted interviews with non-security personnel and asked what actions they would take following an alleged sexual abuse if reported to them. Staff stated they would ensure the victim remains with them and immediately inform an officer or supervisor and would also request the victim not take action to destroy evidence. The facility maintains compliance with this standard with specialized training and appropriate documentation protocol. They use various training materials to keep staff adequately trained to respond to sexual abuse incidents.

The Auditor conducted interviews with supervisory staff to determine what their role would be following a report of sexual assault. The supervisors stated that they would ensure the alleged victim and alleged abuser were removed from the area where the incident occurred and kept separated in the facility. The area of the incident would be secured, and no one would be allowed to enter the area or disturb evidence. The alleged victim would be taken to medical for treatment and transported to the local clinic for a forensic exam. First responder stated during interviews with the Auditor that they were aware of their responsibility regarding their duties if first on a scene. Medical personnel interviewed stated they would ensure a victim's medical needs are met and would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed the Auditor they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse and the victim would be transported off-site for a forensic exam.

The Auditor reviewed the facility's training records for verification that sexual abuse training had been conducted, and training was documented. The training records of staff, contractors, and volunteers verified they had received training on how to respond to incidents of sexual abuse. The Auditor determined the facility has trained staff on their responsibilities as a first responder to an incident of sexual abuse. Staff

	interviewed were well versed in their responsibilities as a first responder during an allegation of sexual abuse. Conclusion: The Auditor reviewed policies, procedures, coordinated response plan, investigative reports, interviewed staff, and determined the facility meets the requirements of this standard.
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115.65 Coordinated response	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.65 Coordinated Response Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Sexual Assault Checklist Staff training NMCD-150102 Coordinated Response Plan Interviews Standard 115.65 requires each facility to develop a written plan to coordinate actions taken in response to an incident of sexual abuse. CNMCF policy states each correctional facility will include in their operating procedures an institutional plan to coordinate actions taken in response to an allegation of sexual abuse. The plan includes, Staff, Volunteer, and Contractor Responsibilities, First Responder (Security/ Non-Security), Shift Supervisor Responsibilities, Medical Response, Investigator, Mental Health, PREA Compliance Manager, and administrative response protocol. CNMCF has developed operating procedures for the coordinated response plan. CNMCF policy describes the procedures employed by the facility when responding to allegations of sexual abuse among supervisors, investigative staff, and facility leadership. A Sexual Assault first responder checklist has been created which supplements the facility operating procedures and outlines staff duties in response to a sexual assault incident. The Auditor conducted interviews with staff listed in the facility's coordinated response plan and staff were knowledgeable regarding their specific duties. The Auditor determined the facility has prepared staff to take appropriate actions in response to inmate sexual abuse. The Auditor interviewed the Warden, investigator,

	medical staff, and PM, regarding the initiation of a coordinated response in the case of an allegation of sexual abuse or harassment. Staff understood their responsibilities and stated that investigations are completed in a timely manner. They stated that cases may be referred for criminal investigation or investigated administratively. Staff stated that monitoring for retaliation is conducted, and a case outcome notice is provided to the inmate victim once a determination is made. The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse. Conclusion: The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse. Based on a review of the facility's policies, procedures, coordinated response plan, training records, and interviews with staff, the Auditor determined that facility exceeds the requirements of this standard.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 Preservation of Ability to Protect Inmates from Contact with Abusers CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Interviews Council 18 Agreement-AFSCME PAQ Memo A review indicated that there are no collective bargaining agreements that prevent the ability of the facility to remove alleged staff abusers from contact with inmates, consistent with provisions of the standard. The facility may take actions that include suspension of an employee during an investigation, and this suspension may continue until disciplinary actions are determined. The Warden confirmed that the facility maintains the right to assign staff. This Auditor confirmed that the agency has the right and ability as the employer to remove alleged staff abusers from contact with inmates. When warranted, the agency may take actions that include suspension of an employee during an investigation. This suspension may continue until the time when disciplinary actions are determined Conclusion: The Auditor determined the facility is compliant with this standard and meets the requirements.

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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.67 Agency Protection Against Retaliation Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Investigative Reports Retaliation Monitor List CD 150102.2-Retaliation Monitoring Form Interviews NMCD policies are written in accordance with PREA standard 115.67 which states retaliation by or against any party, staff, or inmate, who participates in a complaint or report of sexual abuse or sexual harassment, will be prohibited. Facility directives state both staff and inmates who cooperate with sexual abuse and sexual harassment investigations will be protected from retaliation. The facility designates a supervisory staff member to monitor the incident and will monitor retaliatory performance reviews, reassignments, and other retaliatory actions that may be questionable disciplinary actions or performance based. The facility has protection and reporting measures to outline the protection available and require the prompt remediation of any type of retaliation. Any use of involuntary segregated housing for an inmate who is alleged to suffer sexual abuse will only be used after an assessment deems necessary. Staff interviews verified the PM monitors staff and inmates for retaliation for up to 90 days. If warranted, retaliation monitoring may be continued beyond 90 days. If a staff member engaged in an inmate abuse, the staff member would be separated from the inmate and could receive disciplinary action commensurate with the type of behavior taken. If an inmate retaliates against another inmate, the inmates would be kept separate from one another. Other options to protect against retaliation may include protective custody, housing reassignments, or transfer to another facility. Supervisory staff will also monitor disciplinary sanctions, housing, or program changes, and conduct periodic status checks for inmates who report or have reported alleged victimization. If an individual who cooperates with an investigation and expresses fear of retaliation, the facility will take measures to protect that individual against retaliation, including ninety-calendar day retaliation monitoring. Retaliation

	monitoring will cease if an allegation is unfounded. Administrative staff have the authority to move inmates within the facility or to request transfers to other facilities to ensure inmates are not retaliated against. Inmates are not held in the special management housing unless requested by the inmate and the Auditor verified the facility has multiple housing units where inmates can be placed. Conclusion: Staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. The Auditor reviewed documents and determined the facility is compliant with this standard.
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115.68 Post-allegation protective custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 Post-Allegation Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: CD 141100 Protective Custody Risk Screening CD-141500 Restrictive Housing CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention RHU Administrative Segregation Roster Interviews The CNMCF's policy is written in accordance with Standard 115.68 and requires the use of segregated housing to be subjected to the requirements of PREA standard 115.43. NMCD policy prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from abusers. The Auditor determined during document review, that no inmates have been placed in involuntary segregation due to risk of victimization in the 12 months preceding this audit. The facility PM noted the facility did not place any inmate in protective housing due to being at high risk for sexual victimization during the past 12 months and will not use protective housing as a protective measure for a victim at high risk of sexual victimization unless requested by the inmate.

	Interviews with supervisory staff confirmed their knowledge of their responsibility to appropriately adhere to the standard after a victim's allegation of abuse. Conclusion: The Auditor reviewed policy, interviewed supervisory staff, and made observations. The Auditor determined the facility meets this standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 Criminal and Administrative Agency Investigations Policy, Materials, Interviews and Other Evidence Reviewed: CD - 031800 Investigations - Inquiries and Administrative Investigations Interviews Investigative Packets Investigator Training Records PAQ NMCD -150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention OPS Investigator Certificates CNMCF policy are written in accordance with PREA Standard 115.71 and states that all investigations into allegations of sexual abuse and sexual harassment will be conducted promptly, thoroughly, and objectively to include third party and anonymous reports. Policy states that when an allegation of sexual abuse or sexual harassment is received, whether reported verbally or in writing, will be investigated. Staff will ensure all allegations are referred to NMSP in accordance with policy and the facility's administrative investigation protocol. Referrals to NMSP will be documented in the facility's investigative report, PREA investigation, and CMIS database. The Warden will refer the allegation no later than 72 hours after the report was made to the PREA manager and create an entry for each alleged incident. Facility policy requires that all reports, regardless of their source of origination, be referred for investigation and if criminal in nature, referred to the NMSP. CNMCF conducts investigations on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, and that each sexual abuse allegation will have PREA sexual abuse investigation forms documented. It is the responsibility of the facility PM and the facility investigators to gather and

	preserve circumstantial evidence, including any physical and DNA evidence. Investigators will interview alleged victims, perpetrators, witnesses, and review prior reports of sexual abuse involving the parties involved. A facility investigator acknowledged that investigations are required to be initiated within 72 hours of being reported and facility practice is less than 24 hours. All reports of sexual abuse and sexual harassment, including anonymous or third-party reports, are investigated in the same manner as those allegations that have been directly reported by an alleged victim. A review of investigatory files demonstrated that the facility responds promptly to allegations and initiates investigations after an allegation is made. Facility policy requires administrative investigations including efforts to determine whether staff actions or failure to act contributed to sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, credibility assessments, and investigative facts or findings. Credibility assessments are conducted as part of the investigative process by the institutional investigators, and assessments are conducted on all parties involved. The facility is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the facility. Policy prohibits the termination of an investigation if an inmate is released, or a staff member is terminated or resigns. The New Mexico State Police (NMSP) is identified as the primary criminal investigative unit for conducting criminal investigations. Interviews and data are securely maintained with investigative files locked in an area with limited access. Conclusion: The Auditor review of policies, investigative reports, and interviews, confirmed the facility meets requirements for this standard.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.72 Evidentiary Standard for Administrative Investigations Policy, Materials, Interviews and Other Evidence Reviewed: NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention NMCD - 031800 Investigations - Inquiries and Administrative Investigations Investigators' Certifications

	Investigations Interviews OPS Investigators Certifications NMCD policy follows the requirements of Standard 115.72 and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with the investigator and PM confirmed that staff responsible for administrative adjudication of investigations are knowledgeable of the requirements for the evidentiary standard. Investigators interviewed were able to describe what preponderance meant and how they arrive at the basis of case determinations. The Auditor reviewed examples of allegations, including the basis for the determinations which indicated that the investigations are being conducted in accordance with the standard. Conclusion: Based on policy review, investigative file review, and interviews, the Auditor determined the facility meets the requirements of this standard.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 Reporting to Inmates Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CD 151200 Correspondence Regulations SIR Packet PAQ Inmate Notification Letter Report Tracking CD-037200- Code of Ethics Interviews The NMCD policy is written in accordance with Standard 115.73 which requires that an inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Policy states

	that following an investigation of an allegation that an inmate suffered sexual abuse at the facility, the Warden will ensure the victim is notified in writing as to whether the allegation has been Substantiated, Unsubstantiated, or Unfounded. The PM is responsible for preparing the form and presenting it to the victim for his signature. The inmate receives a copy of the form, and a copy is forwarded to the PREA coordinator. Following an allegation that a staff member committed sexual abuse against an inmate, the facility conducting the investigation will inform the inmate of their determination and such notifications will be documented. If notification is unable to be provided, the attempts will be documented as well as any reasons for not notifying, and a copy maintained. The facility's responsibility to provide notification will terminate if the inmate is paroled, discharged, or pardoned. Conclusion: Interviews with the PM, administrative staff, and investigator verified inmates receive notifications, and the facility meets compliance with the standard.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 Disciplinary Sanctions for Staff Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CD 037800 Disciplinary Actions CD-032200 Code of Ethics CD-031800 OPS Investigations and Staff Misconduct Interviews Employee Handbook PAQ NMCD policy reviewed follows Standard 115.76. Staff found guilty of violations are subject to disciplinary sanctions up to and including termination for violating the sexual abuse policy. Employees who are found to have violated facility policy related to sexual abuse and harassment but not actually engaging in sexual abuse will be disciplined in a manner commensurate with nature and circumstances of the acts. NMCD policy states that termination is the presumptive action for those employees

	that are found to have a substantiated case of sexual abuse against them. These cases will be referred to NMSP for criminal investigation and will be reported to any relevant licensing bodies. Additionally, disciplinary sanctions will take into consideration the staff member's disciplinary history, sanctions imposed for similar offenses by other staff, and the nature of the acts committed. The facility investigator and PM verified that if an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, the resignation does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case for prosecution when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment. The Auditor reviewed the facility's policy which included a provision to notify law enforcement agencies of criminal violations of sexual abuse and require the PM notify relevant licensing bodies. The Auditor discussed the requirement for the facility to notify law enforcement and relevant licensing bodies with facility staff who were clear on the requirement following a criminal act of sexual abuse. The Auditor determined the facility has appropriate policies and practices in place, which ensure staff are disciplined for violating the agency's sexual abuse and sexual harassment policies. The facility makes termination the presumptive discipline measure for engaging in acts of sexual violence and reports violations of sexual abuse to NMSP and relevant licensing bodies. Conclusion: Interviews with the Warden, Investigator, and PM, support all allegations against staff for sexual abuse, sexual harassment, retaliation, or neglect, are investigated and disciplinary actions sanctioned. The Auditor determined the facility meets compliance with the standard.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.77 Corrective Action for Contractors and Volunteers Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Contractor and Volunteer Training Verification CD-060200- Citizen and Volunteers Involvement CD-031800 OPS Investigations and Staff Misconduct CD-037800 Disciplinary Action for Classified Employees

	CD-100200 Inmate Visitation Staff Rosters NMCD policy hold both contractors and volunteers to the same standards as employees directly hired by the facility when disciplinary action for engaging in sexual abuse and sexual harassment is conducted. Therefore, any contractor or volunteer engaging in these behaviors would be terminated or prohibited from entering an NMCD facility. Facility policy contains specific language to provide consideration for terminating contracts and prohibiting further contact with inmates in the case of any violation of PREA sexual abuse policies. Conduct of this nature by volunteers or contractors requires reports to law enforcement and relevant licensing bodies and made include criminal charges. Contractual employees' allegations of employee misconduct must be documented and investigation conducted. The contracting agency may perform a separate investigation and remove the employee from their position. Whether a contractual employee should remain at a particular facility will be determined by the Warden at that facility and will vary depending on the severity of the alleged misconduct. Once an investigation is initiated involving a contractual employee, the contract monitor will be notified. Contractual employees who are the subject of the investigation will be permitted to have a representation during the investigatory interview. The investigator must advise the employee of this and arrange a date and time for the meeting that does not delay the investigation. The contractual employee is responsible for obtaining their representative and that person cannot be a NMCD employee. An interview with the Warden confirmed that any contractor or volunteer who violated sexual abuse or sexual harassment policies would be removed from inmate contact or the facility depending on substantiation of the allegations. Contractors and volunteers found guilty of violating sexual abuse or sexual harassment policies will have their security clearance revoked immediately. Contract staff could be terminated by the contract employer and if the conduct is criminal in nature, it will be referred to NMSP enforcement for investigation. Conclusion: The Auditor reviewed documentation, policy, and interviewed staff, and determined the facility meets the standard.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 Disciplinary Sanctions for Inmates

	Policy, Materials, Interviews and Other Evidence Reviewed: Interviews CD-040100- Inmate Records CD-090100- Inmate Discipline CD-176100- Patient rights and Responsibilities Investigative Reports Inmate Handbook NMCD-150100-Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention The CNMCF has zero tolerance for inmate-on-inmate sexual harassment, assault, or abuse. Policy states that consensual sexual activity among inmates is prohibited and if an inmate is found to have engaged in sexual activity, the inmate will be subject to disciplinary action. If an inmate reports sexual abuse and the report is made in good faith, based upon a reasonable belief that the alleged conduct occurred, the inmate will not receive a disciplinary charge for reporting if it is determined to be unfounded. If it is determined that the inmate did commit sexual abuse in the correctional setting, they will be subject to disciplinary sanctions commensurate with the level of the infraction. In addition to potential disciplinary segregation, inmates may have their custody levels raised or may be transferred to another location as determined. A review of facility investigative documents confirms that inmates are not subjected to disciplinary action for making reports of sexual abuse that cannot be proven. The Auditor found no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment in good faith. Agency policy directs facilities offering relevant treatment programs address the underlying reasons or motivations for abuse and consider placing inmates in relevant programs. Conclusion: Based on policy reviews and interviews, the Auditor determined the facility meets the requirements of this standard.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 Medical and Mental Health Screenings; History of Sexual Abuse Policy, Materials, Interviews and Other Evidence Reviewed: Mental Health Services

CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

CD-176100 Patients' rights and Responsibilities

Rights to Confidentiality Form

Behavioral Health Referrals

CD-040100- Inmate Records

Risk Screenings

CD-180200 Behavioral Health

CD-170100 Medical Clinical Services

CD-170102 Psychiatry Services

CD-170800 Medical Records Department

Interviews

CD-180201.1-Authorization for Release of Information Form

HRSA/HRSV

NMCD policy states that if a PREA risk assessment or review indicates an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will ensure the inmate is referred for a follow-up meeting with a medical or mental health practitioner within fourteen calendar days of the intake screening. HRSA/HRSV inmates identified as having a history of physical or sexual abuse, or who pose a reasonable concern that they may be sexually victimized while incarcerated due to age, physical stature, history, or physical or mental disabilities, will be referred. CNMCF policy states that all inmates will have access to health services as described in this policy, regardless of custody level or security classification. An inmate whose health care needs cannot be met at the facility where they are housed will be transferred to a facility where those needs can be met.

During the intake screening history of sexual abuse, a risk screening form is to be completed by staff as part of the initial intake screening process and Mental Health staff will be made available. Inmates in need of mental health services will be identified in a timely manner, have reasonable access to care, and are afforded continuity of care, including aftercare planning. CNMCF staff will identify and monitor inmates who are at risk of sexual victimization, as well as those who have a history of sexual assaultive behavior (HRSA/HRSV).

A review of inmate files indicated the screenings were being conducted in accordance with policy. Medical staff and mental health staff confirmed that if an inmate confirms prior victimization, they are referred to mental health and offered a follow-up meeting. The mental health provider stated that the 14-day follow-up typically occurs sooner. Staff notify inmates identified as high-risk of sexual victimization and high-risk

	of sexual abusiveness the availability for a follow-up meeting. The facility displayed signage throughout the departments, which explains the limitations of confidentiality by medical staff. An interview with staff confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. This information is limited access and only used to make housing, bed, work, education, and other program assignments, in accordance with facility policies. The PAQ notes that all inmates who disclosed prior victimization during screening were offered a follow-up meeting with medical or mental health staff. Conclusion: Based on interviews with medical staff, mental health, and document review, the Auditor determined the facility meets the requirements of this standard.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 Access to Emergency Medical and Mental Health Services Policy, Materials, Interviews and Other Evidence Reviewed: Mental Health Services Staff Response Guide CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Risk Screenings SANE Protocol CD-170100 Medical Clinical Services Valencia Shelter Services Interviews NMCD policy is written in compliance with Standard 115.82 and states that inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. In accordance with the Health Services PREA policy, inmate victims of sexual abuse will receive timely emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health staff. If no qualified medical or mental health staff are on duty at the time an allegation, custody staff first responders will take preliminary steps to protect the victim in accordance with the protective custody policy and will immediately provide

	notification to the appropriate medical and mental health staff. Inmate victims of sexual abuse while incarcerated will be offered information about access to emergency contraception and sexually transmitted infections prophylaxis. Treatment services will be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates during the investigation of the incident. Interviews with medical staff confirm that victims of sexual abuse receive timely, unimpeded access to these services and staff are aware of their responsibilities regarding protection of the victim and evidence. For services that are outside the scope of their experience, the inmate can be treated at the local hospital emergency department or clinic. Qualified forensic nurse examiners located off-site conduct forensic exams and a representative is available at the request of the inmate to provide emotional support services (Valencia Shelter Service). CNMCF policy state that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) without a financial cost to the victim. Interviews with medical staff confirm that inmate victims of sexual abuse would not be charged for services received because of a sexual abuse incident. The facility policy state that an inmate, who is alleged to have been sexually abused less than 120 hours previously and where forensic evidence may be present, will be transported to a local hospital or SANE facility for a forensic medical examination. If a SAFE or SANE cannot be made available, the examination can be performed by another qualified medical practitioner(s), and the facility will document its efforts to provide the examination. A copy of the PREA forensic examination completed at SANE facility and any notes evidencing the facility's efforts will be maintained with the investigation packet. When the incident is alleged to have occurred more than 120 hours prior to notification, a forensic examination is not required. However, the inmate will be referred to health care and mental health services in accordance with policy. During staff interviews it was determined that the facility has an established practice of providing timely and unimpeded access to emergency medical and crisis intervention services. Interviews with facility staff indicate their awareness of the provisions of the standard and their responsibilities. The Auditor noted that inmate victims of sexual abuse are provided timely and unimpeded access to medical, mental health care and crisis intervention services at no expense. Conclusion: Staff interviews confirmed medical services are provided regardless of the inmates' cooperation with the investigation. The Auditor determined the facility meets compliance for this standard.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.83 Ongoing Medical and Mental Health care for Sexual Abuse Victims and Abusers Policy, Materials, Interviews and Other Evidence Reviewed: Mental Health Services CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CD-170800 Medical Records CD-180200 Behavioral Health Clinical Service Interviews Sane Protocol CD-170100 Medical Clinical Services Health Care Manual NMCD policy states that 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 practitioner’s judgment. Policy requires treatment services to be consistent with the community level of care and provided without financial costs regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. If no qualified medical or mental health practitioners are on duty at the time of a report of recent sexual violence, the first responders will take preliminary steps to protect the victim and will immediately notify the shift supervisor. Forensic and sexual assault exams are to be conducted by a qualified SAFE or SANE. The policy is written in compliance with Standard 115.83 and states that the facility will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow-up services, treatment plans, and referrals for continued care following their transfer or release. Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. Interviews with medical and mental health staff reveal that they feel the care provided to the inmates is much better than the community level of care. Both indicated immediate availability and a broad range of available services that are typically not as easily or quickly accessible in the community. Health services staff stated that inmate victims of sexual assault would be assessed immediately, and a determination made as to whether they needed to be transferred to the local hospital

	or SANE clinic. Staff would ensure medical needs would be addressed and evidence not destroyed. A physician would examine an alleged inmate victim and make appropriate decisions to treat any injuries, infections, STIs, or other medical needs. CNMCF policy states that within 60 days of learning of inmate-on-inmate abusers, the mental health staff will conduct a mental health evaluation of the abuser's history and offer treatment as deemed appropriate. The Auditor reviewed documentation provided by the facility of services and mental health care for inmates identified as victims. If the inmate is designated as high-risk, mental health staff will monitor them at periodic intervals established by the practitioner. All services are delivered according to the clinical judgment of the practitioner. The Auditor interviewed mental health staff who confirmed that counseling sessions, referrals, and follow-up services are provided. The mental health practitioner also creates treatment plans and follow-up treatment plans. Mental health staff confirmed the requirement to conduct the evaluation within 60 days of learning about the abuse and stated the assessment would be conducted sooner. Conclusion: The Auditor reviewed policies, procedures, and inmate records, interviewed inmates, and determined the facility meets the requirements of this standard.
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115.86 Sexual abuse incident reviews	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.86 Sexual Abuse Incident Reviews Policy, Materials, Interviews and Other Evidence Reviewed: SART Policy Investigations Incident Review Team CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Interviews Investigative staff CNMCF has a directive that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. Policy states that the facility PM will coordinate a sexual abuse incident review at the conclusion of every sexual abuse investigation unless

	the allegations are determined to be “Unfounded.” The review team consists of upper-level custody and administrative staff, with input from relevant supervisors, investigators, medical, and mental health practitioners, custody personnel, and facility manager. An interview with the PM confirmed that a report of the findings, including recommendations for improvement, will be completed, and submitted in the finale report. The PM stated that the review team would review the investigative report, video, pertinent information, and the Warden would review the recommendations. Administrative and criminal investigations are completed on all allegations of sexual abuse/sexual harassment and NMSP conduct the criminal investigations. The PM stated any recommendations would be implemented, or the reasons for not doing so would be documented. A written report of the findings is prepared and maintained by the facility PM. Conclusion: The auditor reviewed incident review forms and conducted interviews with the Warden, PM, and review team member. The Auditor determined the facility meets requirements for this standard.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 Data Collection Policy, Materials, Interviews and Other Evidence Reviewed: PAQ SSV- reports NMCD Annual Reports Interviews CD-150100 Abuse/Sexual Harassment Prevention and Intervention NMCD Website-www.cd.nm.gov NMCD policy is consistent with the requirements of Standard 115.87 and states that the agency will annually collect uniform data for allegations of sexual abuse necessary to answer all questions from the most recent version of the SSV and complete an annual report based upon the statical data. Policy outlines the data collection process and states that allegations of sexual abuse

	reported to have occurred within facilities will be entered into the CMS database. Additionally, it indicates that the agency PREA coordinator gathers data on each reported incident to aggregate an annual incident report which will include data necessary to complete the SSV. Policy contains the definitions used to collect data at each facility and the PM for each facility is responsible for reporting institutional data. The report is approved by the agency administrative staff and the PC prior to publishing on the agency's website. The agency maintains, reviews, and collects data as needed from all available investigation files and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested. Conclusion: Compliance was determined by review of Annual Reports, data collected, and interviews with PC. The Auditor determined the facility meets the requirements of this standard.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 Data Review for Corrective Action Policy, Materials, Interviews and Other Evidence Reviewed: Corrective Action Memo CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention NMCD Annual PREA Data Report NMCD Website Interviews The agency reviews data annually to assess and improve the effectiveness of its sexual abuse prevention, detection/response policy, and training. The review includes identifying problem areas, taking corrective action, preparing an annual report of its findings, and corrective action. A review of the annual reports contains information on CNMCF's PREA efforts to include the actions taken in response to the previous year's PREA audits. The interview with the PC indicated that data is utilized to assess and improve the agency's PREA safety practices. This includes sexual abuse incident reviews, annual reports, the Survey of Sexual Victimization(SSV), and the annual review by the Wardens at each facility. This information is then utilized to identify trends and

	improve procedures and practices. The PC and the PM indicate that each facility documents allegations and investigations in the centralized database which is used to review trends and any areas of concern. The identification of trends, problematic areas are a priority and if discovered, corrective action is initiated. The agency's annual report is approved and made available to the public through its website. The interview with the PC confirmed that after approval, the report is published on the agency website. The agency may redact specific material from the report when it presents a clear and specific threat to the safety and security of the facility. A review of the website: HTTP://www.cd.nm.gov verified that the annual report is available online. Conclusion: Based on interviews, reviews of the agency website and documents, the Auditor finds this standard compliant and meets requirements.
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 Data Storage, Publication, and Destruction Policy, Materials, Interviews and Other Evidence Reviewed: CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention NMCD Website Interviews NMCD policy mandates that aggregated sexual abuse data from facilities under its direct control and private facilities with contracts be securely maintained. NMCD policy is written in accordance with Standard 115.89 and that data collected pursuant to 115.87 will be made readily available to the public through the agency's website excluding all personal identifiers. The policy states that the agency will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The PM and PC stated that all electronic data is maintained in a centralized system, and all paper files are secured at the facility. The Auditor reviewed the website and confirmed previous annual reports are available to the public. A review of previous reports confirmed that no personal identifiers were publicly available. The facility PM is responsible for reporting institutional data to the PC and the facility data collected

	is maintained by the PM. Aggregated sexual abuse data for the agency's annual report is compiled from investigative files, incident reviews, and other relevant documents. Agency and facility data is maintained electronically in secure servers which require a username and password to access. Conclusion: Based on a review of the PAQ, policies, agency website, and information obtained from staff interviews, the Auditor determined this standard is compliant and meets requirements.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 Frequency and Scope of Audits Policy, Materials, Interviews and Other Evidence Reviewed: Interviews PAQ Website Institutional tour Documentation Review The Auditor was provided access to all areas of the facility and was provided relevant policies, procedures, and documents requested. The Auditor conducted private interviews and was afforded the opportunity to receive confidential correspondence from inmates. Policies and secondary documentation were provided before the onsite tour and during the post audit. The facility staff facilitated the interviews in a timely and efficient manner and informal interviews with inmates confirmed that they were aware of the audit and the availability to communicate with the Auditors. Prior to the on-site review, the Auditor's contact information was provided to the facility to be posted in inmates living areas advising of the audit. These notices were sent to the facility staff for posting six weeks prior to the onsite visit and were observed posted in various areas of the facility. Conclusion: The Auditor finds this standard to be compliant and meets requirements.

115.403	Audit contents and findings
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 Audit Contents and Findings The report for CNMCF is publicly available at the NMCD website: https://www.cd.nm.gov

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

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

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

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

	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).)	na
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

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

	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.)	na
	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.)	na
	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.)	na
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.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
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.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
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	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
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.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
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.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
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.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
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.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	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).)	na
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.)	na
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).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

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

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.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
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