

PREA Facility Audit Report: Final

Name of Facility: Northeast New Mexico Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/02/2025

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: 12/02/2025

AUDITOR INFORMATION

Auditor name: Catrett-Bell, Joy

Email: jcbell1111@gmail.com

Start Date of On-Site Audit: 11/19/2025

End Date of On-Site Audit: 11/20/2025

FACILITY INFORMATION

Facility name: Northeast New Mexico Correctional Facility

Facility physical address: 185 Dr. Michael Jenkins Road, Clayton, New Mexico - 88415

Facility mailing address:

Primary Contact

Name:	Rosemary Moreno
Email Address:	rosemary.moreno@cd.nm.gov
Telephone Number:	505-313-3614

Warden/Jail Administrator/Sheriff/Director	
Name:	John Beaird
Email Address:	john.beaird@cd.nm.gov
Telephone Number:	505-250-4217

Facility PREA Compliance Manager	
Name:	Rosemary Moreno
Email Address:	rosemary.moreno@cd.nm.gov
Telephone Number:	5053133614

Facility Health Service Administrator On-site	
Name:	Alicia Gallegos
Email Address:	alicia.gallegos@wexfordhealth.com
Telephone Number:	575-374-4005 21039

Facility Characteristics	
Designed facility capacity:	665
Current population of facility:	573
Average daily population for the past 12 months:	579
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

Age range of population:	19-71
Facility security levels/inmate custody levels:	Level III, Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	88
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	40
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	10

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

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
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

7

- 115.16 - Inmates with disabilities and inmates who are limited English proficient
- 115.21 - Evidence protocol and forensic medical examinations
- 115.31 - Employee training
- 115.33 - Inmate education
- 115.41 - Screening for risk of victimization and abusiveness
- 115.51 - Inmate reporting
- 115.53 - Inmate access to outside confidential support services

Number of standards met:

38

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:	2025-11-19
2. End date of the onsite portion of the audit:	2025-11-20

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	625
15. Average daily population for the past 12 months:	592
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	592
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:	4
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:	1
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:	130
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:	3
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:	2
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:	5

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:	1
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:	1
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:	59
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:	98
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:	1

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:	8
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:	Random staff were selected from all shift assignments. There were no barriers in completing interviews.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> 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?	<input checked="" type="radio"/> Yes <input type="radio"/> 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):	The Auditor reviewed the roster and selected inmates based upon the above factors.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
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:	1
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:	1
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:	1
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:	3
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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
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).	NA

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:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
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).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
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:	6
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

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor 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 30 inmates, (15 random and 15 targeted) A total of 32 inmate interviews was 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.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>58. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> 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):	21
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

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

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

	<input type="checkbox"/> Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	Random staff were selected from all shift assignments. There were no barriers in completing interviews.

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

<p>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).</p>	<p>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.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>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?</p>	<p> <input checked="checked" type="radio"/> Yes <input type="radio"/> No </p>

<p>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>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 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. Inmate files were reviewed 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 classification records, volunteer records, contractor records, and staff files including PREA disclosure forms relevant to hiring and promotions.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

Sexual Harassment Investigation Outcomes

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

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	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	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:

2

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> 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:	1
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any 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:	1
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

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

0

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.

The facility reported there had been no offenses committed to file.

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100-Offender Protection Against Abuse and Sexual Misconduct</p> <p>CD-150100.D Reporting Procedures</p> <p>Organizational Charts</p> <p>Job Description</p> <p>New Mexico policy CD-150100 outlines the facility's approach to implementation of practices covered under the agency PREA policies. NMCD comprehensive PREA policy mandates a zero-tolerance policy on all forms of sexual abuse and harassment. The Agency PREA policy is a document that serves to unify the agency's approach to</p>

	<p>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 three-year cycle required by the standards.</p> <p>Each NMCD facility, including Northeast New Mexico Correctional Facility(NENMCF), 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.</p> <p>Conclusion: Based on the Auditor's review of policies, memorandums, organizational facility charts, and staff interviews, the Auditor determined that NENMCF meets the mandate for the standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.12 Contracting with Other Entities for the Confinement of Inmates</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Interviews</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p>PAQ</p> <p>Contracts</p> <p>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.</p> <p>Conclusion: Based on staff interviews and document review, NENMCF meets this standard.</p>

115.13	Supervision and monitoring
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 751 376">115.13 Supervision and Monitoring</p> <p data-bbox="256 409 1091 443">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p data-bbox="256 488 432 521">Daily Roster</p> <p data-bbox="256 555 671 589">PREA Rounds Documentation</p> <p data-bbox="256 622 440 656">Staffing Plan</p> <p data-bbox="256 689 424 723">Shift Roster</p> <p data-bbox="256 757 384 790">Cameras</p> <p data-bbox="256 824 624 857">Unannounced Rounds Log</p> <p data-bbox="256 891 1187 925">CD-150100 , Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p data-bbox="256 1126 1481 1541"> NMCD policy CD-150100 states that the facility will complete an annual staffing plan and will continue to review the plan at a minimum of once annually. NMCD policy states that all facilities, including contracting facilities, will complete a yearly staffing plan and submit the report for approval. The Warden and management staff interviewed stated the staffing plan is reviewed annually and safety/security issues are always a primary focus. Policy states the Staffing Plan is maintained by the facility with a copy forwarded to the PREA coordinator for review. In circumstances of deviations, the facility documents the reasons for deviations. Common reasons for deviations are emergency medical leave, inmate medical transportation, in-service training, annual leave, and retirements. </p> <p data-bbox="256 1574 1481 2078"> The Auditor observed staff conducting daily housing unit rounds to ensure inmate safety and provide inmates access to management staff. During these unannounced rounds, staff identify any unusual activity, the need for security improvements, and PREA violations. Staff address any unusual activity or PREA violations. The Warden, Associate 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 reference. Daily staff rosters were reviewed to ensure there were adequate staff assigned in accordance with the current staffing plan for critical and non-critical post assigned. Management staff support 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 </p>

	<p>post during a shift and provided justification. The review of post assignment rosters identified that management staff were able to maintain compliance within the staffing plan requirements to include staff reassignment while ensuring critical posts were staffed.</p> <p>The facility was adequately staffed and provided safety for the facility's population of inmates which included LGBTQ inmates, mental health needs inmates, disabled, or LEP. The Auditor observed cameras in various areas of the facility and interactions between staff and inmates.</p> <p>Conclusion: Based on review of the staffing plan, post assignment schedules, post assignment rosters, interviews, and review of unit logs, the Auditor determined the facility meets the mandate for the standard.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.14 Youthful Inmates</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD Policy Directive CD-150100- Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p>Interviews</p> <p>Age Report</p> <p>Memo</p> <p>PAQ</p> <p>The Auditor reviewed NENMCF policy, which stated that youthful inmates will not be placed in a housing unit with sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or housing units. The Auditor interviewed staff who stated they had no knowledge of a youthful offender housed at the facility during the audit cycle. A review of documentation, PAQ, and staff interviews confirmed there have been no youthful inmates housed at the facility.</p> <p>Conclusion: Interviews with the Warden, PM, and PC confirmed that NENMCF does not house youthful offenders. The Auditor determined the facility does not house youthful</p>

	offenders and meets compliance with the standard.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.15 Limits to Cross-gender Viewing and Searches.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>HRSA/HRSV</p> <p>NMCD - 130300 Searches Conducted in Correctional Facilities</p> <p>NMCD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p>Pat Down Search Training</p> <p>Training Records</p> <p>PAQ</p> <p>Cross Gender Announcement Log</p> <p>Interviews</p> <p>NMCD 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 medical personnel. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Staff interviews confirmed that officers have been trained to conduct cross-gender pat searches and receive PREA training annually.</p> <p>Staff interviews did not indicate any cross-gender strip or cross-gender correctional or medical staff had conducted visual body cavity searches of inmates. The PAQ listed zero cross-gender strips or cross-gender visual body cavity searches of inmates in the past 12 months.</p> <p>Policy states that a licensed physician, physician's assistant, or nurse practitioner must conduct a body cavity search and medical staff who perform a body cavity search do not have to be 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 and there will be at least one staff member present who is the same sex as</p>

	<p>the inmate being searched.</p> <p>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. Training topics and definitions were found to be consistent with PREA standards and staff sign a PREA Acknowledgement form as verification of training.</p> <p>The PAQ noted that staff have received training and confirmation of the training was provided. Staff interviews indicated they received PREA training during pre-service and annual service training sessions. The Auditor was provided training rosters identifying correctional staff’s completion of the required PREA training.</p> <p>Staff interviewed stated that the opposite gender staff must announce themselves when entering the housing unit and the Auditor observed this practice during the tour. Inmates acknowledged that when a female staff entered the housing units, the opposite gender announcement was made by assigned housing unit officer or by staff entering the unit.</p> <p>The PM confirmed procedures allow inmates to shower, change clothes, and use the restroom without being in direct view 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.</p> <p>Conclusion: Based on the review of policies, documentation, training rosters, and interviews, the Auditor determined the facility has demonstrated compliance and meets the provisions of this standard.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.16 Inmates with Disabilities and Inmates who are Limited English Proficient</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Interviews</p> <p>CD-041000 Inmate Orientation</p>

NMCD Directive CD-150100 Sex Abuse/Sexual Harassment Prevention/Intervention

Inmate Handbook-English/Spanish

Inmate Tablets

Linguistica Service Reference Guide

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. NENMCF 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 conduct or threats prohibited and inmates' right to be free from retaliation for reporting or participating in a related investigation. Educational materials also include information on treatment, advocacy, and counseling services.

NENMCF 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 an effective interpreter could compromise the inmate's safety.

The agency produces a PREA inmate handbooks in Spanish and English. The Warden confirmed that the agency is taking significant steps to ensure that materials are provided in various formats to include closed captioning of the PREA inmate video and inmate electronic tablets with PREA programming.

Signage displaying PREA reporting information were observed in housing units in English and Spanish and the Auditor verified the translation service provided by the facility was an active interpretation service to aid LEP inmates. Each inmate entering the facility is provided a written copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment and are provided PREA education within 72 hours of arriving at the facility. Inmates are required to sign as verification of receipt of the inmate handbook and Tablet containing PREA education/notification processes.

Conclusion: The Auditor reviewed the Agency's policies, procedures, Inmate Handbook, PREA educational video, inmate tablets, interpretive services contracts,

	and training records. The Auditor determined the facility the exceeds requirements of this standard.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.17 Hiring and Promotion decisions</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Employee Handbook</p> <p>CD-030200 Recruitment Selection and Hire of Correctional Officers</p> <p>Contractor Training list</p> <p>CD-025100 Contractor Records/Contracts</p> <p>Policy CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention</p> <p>NMCD-060200 Citizen involvement and Volunteers</p> <p>Employment Application</p> <p>Staff Promotions</p> <p>Interviews</p> <p>PAQ</p> <p>NCIC Form</p> <p>Background Information Request</p> <p>Information Waiver Form</p> <p>NMCD150100 requires all employees, contractors, and volunteers to have criminal background checks completed. 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 has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other 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, or been</p>

	<p>civilly or administratively adjudicated to have engaged in the activity described above.</p> <p>The policy requires that once every five years criminal history checks are processed for NENMCF employees and annually for contract staff. The facility can authorize an NCIC check at any time within the 5-year period for staff if circumstances prevail. The five-year criminal history checks will be completed, documented, and placed in employee files. Any information produced from the criminal history check that has not been previously reported or investigated will be referred to OPM for an investigation. Volunteers and contractors who have contact with inmates at the facility will have an annual criminal history check processed and any information discovered from the background check 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.</p> <p>NENMCF requires that all applicants apply for positions and complete the employment application packet which includes a PREA questionnaire form. 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 documented instances of sexual harassment are used in determining whether to hire or promote applicates or whether to enlist the services of contractors who may have contact with inmates. Newly hired staff and contractors undergo a background check and are not offered employment if disqualifying information is discovered. Reference checks are performed at this level of the process and if the applicant has worked at another correctional facility, their previous employer could be contacted.</p> <p>In addition, any applicant applying for a promotion is required to answer the PREA questions regarding any PREA related cases in which they may have been implicated. The Auditor concluded the facility is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff and enlisting the services of volunteers, contractors, and staff promotions.</p> <p>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.</p>
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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

	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Policy Directive CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention</p> <p>Facility Camera Placement</p> <p>Observations</p> <p>Interviews</p> <p>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 before implementation of the video system. During interviews with the agency PREA coordinator and facility PM, it was verified that the facility maintenance supervisor and the PM would discuss all projects at the facility prior to a start date to ensure compliance with the PREA standards are met.</p> <p>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 enhancements will increase their ability to protect inmates from sexual abuse. Facility staff monitor the cameras to ensure they are operational and to identify any potential problem areas that may need additional coverage.</p> <p>Conclusion: The Auditor determined that the facility meets the provisions of this standard.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>115.21 Evidence Protocol and Forensic Medical Examinations</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Policy Directive CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p>CD-031800 OPS Personnel Investigations and Misconduct</p> <p>NM Sexual Assault Helpline</p>

Investigator Training

NMCD Policy CD 170100 Medical Clinical Services

Alternative to Violence

PREA Investigation Checklist

NM Sexual Assault Helpline

MOU New Mexico State Police (NMSP)

Albuquerque SANE Collaborative: WWW. ABQ.SANE.org

NCJ 228119 National Protocol DOJ Directive

Standard 115.21 Evidence Protocol and Forensic Medical Examinations, stipulates that administrative and criminal investigations are completed for all allegations of sexual abuse/sexual harassment. NENMCF investigators and NMSP staff are trained in conducting sexual assault investigations in confined settings-prisons. During review of training documents, it was confirmed that investigators received instruction in conducting sexual assault investigations

NENMCF policy states that investigations of sexual abuse or harassment 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 the Sexual Abuse/Sexual Harassment Investigations protocol. Agency trained investigators conduct administrative investigations for allegations of sexual abuse or harassment and the NMSP conduct investigations that appear to be of a criminal nature with possible prosecutions. The PREA Manager serves as an investigative liaison between the NMSP and facility.

When a PREA incident occurs, facility staff are required to preserve the crime scene until an investigator arrives to collect and process physical evidence from the scene. The facility investigation will be coordinated as necessary to ensure efforts by staff will not be an obstacle for prosecution, and the facility will remain informed of the status of the investigation. The facility's investigation will proceed in accordance with NMSP protocol regardless of whether the referral results in criminal prosecution.

Investigators are trained using the Crime Scene Management and Preservation training modules and the facility provides 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, and Crime Scene Management/Preservation and NIC PREA Investigator training.

NENMCF has a MOU between RCCNM for emotional support services. Inmates are made aware of the confidential emotional support services available to them in the Inmate Handbook. Inmate tablet, and PREA signage in both English and Spanish

	<p>displayed throughout the facility. A victim advocate from New Mexico 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.</p> <p>NENMCF does not employ SAFE or SANE staff and forensic examinations are provided at Albuquerque SANE Collaborative. There were no forensic examinations conducted during the past 12 months.</p> <p>Conclusion: Interviews with staff and review of supporting documentation confirmed compliance with this standard. The Auditor determined that the facility exceeds the requirements of this standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.22 Policy to ensure Referrals of Allegations for Investigations</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment</p> <p>PREA Investigation Checklist</p> <p>Investigation Packets</p> <p>New Mexico State Police Memo</p> <p>NMCD Policy CD 031800 OPS Personnel Investigations and Staff Misconduct Reporting</p> <p>NMDC PREA Hotline</p> <p>Interviews</p> <p>NENMCF 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.</p>

	<p>Investigators track all sexual abuse and sexual harassment through the SRNS system, and 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 a tracking document to ensure all required steps of the investigation process are completed timely.</p> <p>The information tracked includes the date of the allegation, name of the victim/perpetrator, RHU placement/reviews, initiate After-action review, full protocol, investigation outcome/date, date inmate notified of outcome, and retaliation monitoring review. Once the investigation is closed, the inmate is provided notification of the outcome. A review of training documents confirmed that investigators received specialized training instruction in conducting sexual assault investigations in prisons.</p> <p>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 notifies their supervisor who is responsible for initiation of 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.</p> <p>Conclusion: The Auditor reviewed investigative files, conducted interviews, and observed daily staff assignments at NENMCF. The Auditor determined the facility is compliant and meets provisions of this standard.</p>
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.31 Employee Training</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD – Policy CD-150100, Sexual Harassment Prevention and Intervention</p> <p>CD-031000-Correctional Officer Training and Staff Development Requirements</p> <p>PREA New Hire Training Lesson Plan</p>

	<p>Monthly Incident PREA Tracking (Form 150102.5)</p> <p>CD-032200 Code of Ethics.</p> <p>NMCD Policy CD 150800 Transgender, Intersex, Gender Nonconforming</p> <p>NMCD Policy CD-130300 Search Policy</p> <p>Training and Staff Development</p> <p>Staff Training Roster</p> <p>PAQ</p> <p>Coordinated Response</p> <p>Staff Interviews</p> <p>Annual Refresher Training</p> <p>PREA Training Curriculum In-Service Orientation</p> <p>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 PREA training is conducted annually at the facility to fulfill annual training requirements. The curriculum offered allows the employees to remain current on policies and procedures regarding sexual abuse and harassment.</p> <p>Employees are provided remedial training during staff briefings and through intra-facility emails. The Auditor was provided copies of the facility's PREA curriculum, training rosters, employees certificates, and verified employee training. The documents included Zero tolerance policy, staff duty to report third party allegations, employee training, and cross gender viewing.</p> <p>Conclusion: The Auditor determined the facility exceeds the requirements of this standard.</p>
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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:

AD 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

Employee PREA Fact Reference Card

Verification Report

NENMCF provides standardized training for all new employees, contractors, vendors, student interns, and volunteers who provide services at facilities. Contractors who have contact with inmates will have direct continuous supervision by facility staff. Contractors and volunteers 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, 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 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 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 reviewed agency policies, procedures, training curriculum, acknowledgment forms, conducted interviews, and determined the facility meets the requirements of this standard.
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115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.33 Inmate Education</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD Policy CD-150100, Sexual Harassment Prevention and Intervention PAQ</p> <p>Policy CD-014100 Inmate Orientation</p> <p>Inmate Orientation PREA Signature Form</p> <p>Interviews</p> <p>Linguistics Language line Inc</p> <p>Inmate PREA Handbook (English and Spanish)</p> <p>PREA Posters (English and Spanish)</p> <p>Inmate File Review</p> <p>Inmate Tablets</p> <p>NENMCF policy is written in accordance with Standard 115.33 and states inmates will receive within 30 days of arrival at the new facility, comprehensive PREA education during intake process after transfer from another facility. Within 72 hours of arrival the facility, an inmate will receive educational material on Sexual Abuse Zero tolerance, Reporting PREA, PREA Manager contact information, and Victim advocate services. In accordance with policy, inmates will receive PREA orientation during arrival at the assigned correctional facility, and the Warden will develop and maintain a PREA orientation program for newly admitted inmates.</p> <p>During the initial intake, inmates receive comprehensive PREA training that verifies the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment.</p>

	<p>Inmates also receive information on how to report incidents of sexual abuse or sexual harassment. This information is provided in writing, inmate tablets, and video presentation. Topics covered include Inmates' rights to be free from sexual abuse and sexual harassment, retaliation monitoring, methods to report incidents, and contact information for reporting. Interviews with the PM and inmates verified PREA training is provided during Intake to inmates by classification staff or other unit management staff.</p> <p>During the initial intake, classification staff create a file in the SRNS program to ensure that each PREA education is verified and documented. The Auditor sampled inmate files and requested that NENMCF staff provide inmate 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, and it is verified that the inmate has signed a PREA training acknowledgement form.</p> <p>The facility contracts with an outside vendor for interpretative services 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 agency PREA publications.</p> <p>The NMCD provides written educational materials that include PREA posters, inmate's 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 promote PREA resources throughout all areas of the facility.</p> <p>Conclusion: The Auditor determined the facility exceeds the requirements of this standard.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34 Specialized Training: Investigations</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Investigator Training Certificates</p> <p>NMCD- Policy CD-150100, Sexual Harassment Prevention and Intervention</p> <p>NIC Certifications</p>

	<p>Investigation Documentation</p> <p>CD-031800 OPS Personnel Investigations and Staff Misconduct Reporting</p> <p>Interviews</p> <p>PAQ</p> <p>NENMCF 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 states that facility investigators are required to receive specialized training to conduct sexual abuse investigations in confinement settings.</p> <p>The agency has trained investigators who have completed the required PREA training and continue to further their knowledge in critical institutional investigating practices. Specialized training completed includes, “Investigations in Confinement Settings”, Techniques for interviewing sexual abuse victims, Miranda and Garrity warnings, Sexual abuse evidence collection, and Case referral procedures.</p> <p>The facility utilizes the Investigator training manual and provides specialized training to assist investigators in administrative PREA investigations. 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 rights. The evidentiary standard of preponderance is noted within the training referencing investigations. The training also 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.</p> <p>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.</p>
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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

NMDOC 1-5 Modules

Credentials for Health Service Staff

Medical In-service Training PREA Acknowledgement

Wexford Health Care

Mental Health Training

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 (Wexford) mental health staff and (NMDOC) 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 set forth in policy.

The Auditor reviewed the facility training curriculum specific to medical and mental health staff and these materials cover the PREA standards and include additional PREA training. PREA training materials include topics associated with 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 staff at NENMCF receive training beyond the standard's minimal requirements that is facilitated by their contracting firm (Wexford). 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 documentation for medical and mental health staffs completion of PREA training 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 staff who were knowledgeable of the PREA training offered and confirmed having received the general and specialized training during the hiring process and annually at in-service training. A review of training files verified that training has been provided, and the participants understand

	<p>the requirements of PREA.</p> <p>Conclusion: Based on review of the agency's policy, records, and staff interviews, the Auditor determined the facility meets the requirements of this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.41 Screening for Risk of Victimization and Abusiveness</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention</p> <p>HRSA/HRSV (Color Coded)</p> <p>SRNS (Sexual Risk Indicator Screening)</p> <p>Intake Screening Instrument</p> <p>Policy CD 040101 Inmate Records</p> <p>Policy CD 04000 Information Technology</p> <p>PAQ</p> <p>Medical Referrals</p> <p>Risk Assessment</p> <p>30 Day Review Documentation</p> <p>Interviews</p> <p>NENMCF 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.</p> <p>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</p>

	<p>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.</p> <p>Staff interviewed by the Auditor confirmed and articulated the initial intake risk screening process utilized for inmates during their 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 and if necessary, staff will submit a medical referral. The facility utilizes an assessment form to document and assess each inmate. The information is entered into the electronic SRNS tracking system. During interviews with inmates, they stated they were asked PREA related questions during intake orientation and received a reassessment within 30 days of arrival.</p> <p>Review of inmate's files confirmed their screening within 72 hours of intake, psychological screening, and reassessment within 30 days from the date of arrival. The facility will reassess an inmate's risk level 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, a referral from a staff member, medical request, or incident of sexual assault.</p> <p>Staff meet with inmates to conduct the reassessment, and inmates are not disciplined for refusing to answer, or not disclosing information. Any refusal by the inmates is documented in accordance with policies.</p> <p>The Auditors interviewed classification staff responsible for initial screenings, and they stated the risk screening is completed within 48 hours of the inmate's arrival at the facility and 14-day medical referrals are made if required. The Auditor reviewed inmate files, intake records, and risk screenings to confirm screenings were being conducted within 72 hours of intake were documented.</p> <p>The staff responsible for risk screening confirmed that 30-day reassessments are being completed prior to the 30-day requirement and maintained a 21-28-day reassessment review procedure.</p> <p>Conclusion: The Auditor conducted a review of policies, procedures, inmate records, made observations, interviewed staff and inmates, to determine the facility exceeds the requirements of this standard.</p>
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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

PAQ

Policy CD-080102 Institutional Classification

Inmate Housing Assignments

Classification Procedure-Inmate Job Assignments

The Auditor reviewed inmate classification records to confirm that facility staff made individualized considerations for inmates when determining their housing placements, programming opportunities, work areas, and other assignments to ensure each inmate is housed safely while at the facility. The Auditor observed classification 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 SRNS facility program 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 inmates 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 their own perceptions of the inmate.

The Auditor toured housing units in the facility and observed inmates living areas which provide an area to shower, change clothes, and use the restroom without staff of the opposite gender seeing them without clothing.

Classification staff utilize an assessment form to determine an inmate's classification risk, and the results generated from the assessment prevent the housing assignments of potential victims with potential abusers. When an inmate is determined to be at high risk for victimization or abusiveness, it is the responsibility of the staff member conducting the screening to enter the results in SRNS and make appropriate referrals. An inmate that is determined to be at high risk for victimization will not be placed in the same cell or work area as an inmate that has been determined to be at high risk for abusiveness.

Conclusion: The Auditor reviewed policies, procedures, inmate records, made observations, and conducted interviews to determine the facility meets the requirements of this standard.

115.43	Protective Custody
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 632 376">115.43 Protective Custody</p> <p data-bbox="256 409 1091 443">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p data-bbox="256 488 1374 566">NMCD Policy-150100, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention</p> <p data-bbox="256 600 536 633">RHU Weekly Report</p> <p data-bbox="256 667 791 701">NENMCF Unit Classification Procedure</p> <p data-bbox="256 734 692 768">CD 141100 Protective Custody</p> <p data-bbox="256 801 762 835">Screening for Risk and Abusiveness</p> <p data-bbox="256 869 834 902">NMCD Policy-141500 Restrictive Housing</p> <p data-bbox="256 936 405 969">Interviews</p> <p data-bbox="256 1093 1481 1462">NENMCF 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 complete, 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 from the abuser or likely abusers exist, the inmate will be assigned to temporary segregation for a period not to ordinarily exceed thirty calendar days.</p> <p data-bbox="256 1496 1441 1910">The facility uses their SRNS program to ensure that inmates at high risk of victimization are not housed with inmates at high risk of predatory behavior. 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.</p> <p data-bbox="256 1944 1465 2067">Facility inmates in 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</p>

	<p>nature of the restrictions.</p> <p>Staff at NENMCF are trained on the NMCD policy and their responsibilities regarding this standard. Staff interviewed stated they would conduct an immediate assessment of available housing alternatives prior to placing an inmate in the restrictive housing unit. Staff are required to assess and document all available alternatives.</p> <p>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.</p> <p>Conclusion:</p> <p>The Auditor reviewed policies, procedures, 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.</p>
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115.51 Inmate reporting	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.51 Inmate Reporting</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>MOU Colorado External Party PREA Reporting (CDOC.colorado.gov)</p> <p>NMCD Policy CD-150100 Inmate Sexual/Abuse Harassment Prevention</p> <p>Inmate Orientation Handbook</p> <p>PREA Signage</p> <p>Interviews</p> <p>Staff PREA Response Card</p> <p>Grievance Form</p> <p>PREA standard 115.51 states facilities must provide multiple avenues for inmates to privately report sexual abuse and sexual harassment, retaliation for reporting sexual</p>

abuse and sexual harassment, and if there is staff neglect or violation of responsibilities. The directive designates multiple mechanisms for the 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 and/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 by other inmates, retaliation from staff, 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 management staff, 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.

During interviews with inmates, they stated they could tell any of the staff if they had a PREA issue. Inmates expressed that they felt safe and knew of the PREA safety postings on the bulletin boards in the housing units, and shared areas. NENMCF provides inmates a third-party line for a Victim Advocate to report any abuse or harassment and they can write 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.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.52 Exhaustion of Administrative Remedies</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>PAQ</p> <p>CD 150500 Inmate Grievance</p> <p>Interviews</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Inmate Handbook</p> <p>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 the Warden or officials above that level. A summary of the inmate administrative remedies procedure explaining how to use it is included in Appendix A of the Inmate Handbook. The facility can assign a staff member to function as an advocate during these proceedings. Facility staff understood the procedures for submitting emergency grievances alleging the risk of imminent sexual abuse and supervisors were aware of the time limits in response to an emergency grievance alleging an imminent risk of sexual abuse.</p> <p>The PREA supplement in the inmate handbook states that inmates will not be required to use an informal grievance process, or to attempt to resolve with staff, referencing an alleged incident of sexual abuse and the supplement informs inmates on how to report allegations of sexual abuse.</p> <p>The inmate grievance standard states that a time limit will not be imposed as to when an inmate may submit a grievance regarding an allegation of sexual abuse and third parties, fellow inmates, staff members, family members, attorneys, and advocates, will be permitted to assist inmates in filing requests for administrative remedies relating to an allegation of sexual abuse. The above-mentioned will also be permitted to file these requests on behalf of inmates and a final decision will be made on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The facility received only one grievance during the</p>

	<p>audit period which was resolved.</p> <p>Conclusions: Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets the provisions of the standard.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>115.53 Inmate Access to Outside Confidential Support Services</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Inmate Handbook</p> <p>CD 100701 Monitoring Form</p> <p>PREA Posters</p> <p>NMCD Policy-150300 Inmate Access to Telephones</p> <p>NMCD Policy- 151200 Correspondence Regulations</p> <p>Interviews</p> <p>Inmate Tablets</p> <p>MOU- RCCNM</p> <p>Acknowledgement of Receipt of Handbook</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Alternatives to Violence</p> <p>NM Sexual Assault Helpline</p> <p>NMCD policy state that NENMCF provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The facility has established a MOU with New Mexico Rape Crisis Center, Alternatives to Violence, for their affiliated services. NENMCF also provides 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.</p> <p>The facility provides availability of PREA resources on inmate bulletin boards located</p>

	<p>in the housing units and adjoining common areas. Inmates are made aware of the extent external communications are monitored, and which lines of communication can be utilized for confidential purposes. Signs posted in the inmate housing units include advisories that the calls may be anonymous and will not be monitored.</p> <p>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 through the inmate tablets.</p> <p>Conclusion: Based on policy review, interviews, and correspondence review, the facility exceeds the requirements of this standard.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.54 Third-party Reporting</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>PREA Investigation Hotline</p> <p>NMCD Policy-150500 Inmate Grievances</p> <p>NMCD CD Policy-151200 Correspondence Regulations</p> <p>Interviews</p> <p>Inmate Handbook</p> <p>PREA Signage</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>The Auditor reviewed the NMCD policy which state that inmates may report allegations of conduct prohibited and retaliation can be reported verbally or in writing to any facility staff member, the Sexual Abuse Hotline, PREA numbers, or third-party</p>

	<p>avenues. The NMCD website, facility notices, tablet, and NENMCF inmate handbook, provide inmates with contact information for reporting any PREA violations. NMCD-150100 and NENMCF website provide avenues that meet the requirements of PREA standard 115.54. The inmate handbook and tablet provide third party contact information.</p> <p>The agency website and posted PREA notices, assist third parties in reporting allegations of sexual abuse/sexual harassment. Inmates interviewed by the Auditor stated they were aware of third-party reporting methods and would probably feel 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's PAQ affirmed that the agency publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. Policies were reviewed that 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.</p> <p>The agency website states that all allegations of sexual abuse should be reported and will be investigated. Third parties can report by contacting the facility, PREA Sexual Abuse Hotline or through written correspondence.</p> <p>Conclusion: The Auditor reviewed materials, policies, and made observations during the facility tour and determined the facility meets requirements for the standard.</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.61 Staff and Agency Reporting Duties</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD 032200 Code of Conduct</p> <p>CD-037800 Employee Disciplinary Action for Employees</p> <p>Staff Response Guide</p> <p>Staff Training Rosters</p> <p>Investigation Packets</p> <p>Coordinated Response Plan</p> <p>Interviews</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p>

	<p>PREA Lesson Plan</p> <p>Standard 115.61 requires confidentiality of all information relevant to sexual abuse or harassment beyond what is required to be shared as a part of the report, treatment, or investigation. NMCD directives state that reasonable steps will be taken to ensure the confidentiality of information obtained during the inmate initial risk assessment process. The policy also states that individuals interviewed as part of a PREA investigation should specifically be warned not to discuss the investigation with others and staff that intentionally compromise this confidentiality will be subject to discipline in accordance with the Employee Discipline policy.</p> <p>NENMCF policy requires that staff report sexual abuse and sexual harassment immediately to a supervisor or other staff member of a higher rank. Once the abuse is reported, staff are instructed and required not to discuss the situation or allegation with anyone else unless those staff are investigating, making security decisions, or providing services to the inmate victim. During interviews with staff, the Auditor determined staff understood their responsibility to report any suspicions they have regarding sexual abuse or sexual harassment of an inmate.</p> <p>The Auditor reviewed agency training curriculum for staff, volunteers, and contractors which included PREA training on reporting of sexual abuse and sexual harassment allegations. Staff members are required to read the agency's policy and sign receipt of attendance on an annual basis. The Auditor verified staff, contractors, and volunteers received training and reviewed the policy on how to report serious or unusual information related to PREA allegations. Staff understand the need to keep information limited to only those that need to know to preserve the integrity of the investigation. Staff interviewed stated that details related to either inmate allegations or staff allegations should remain confidential, and they would only discuss details with supervisors and investigators.</p> <p>Policy requires that medical and mental health personnel inform inmates of mandatory reporting requirements and their limits of confidentiality to victims of sexual abuse. NMCD policy requires medical and mental health staff to report any knowledge of sexual abuse within an institutional setting and medical staff are required to disclose to inmates, their duties to report. Medical and mental health providers were able to discuss the limits to confidentiality and how they provide that information to inmates during a medical assessment.</p> <p>Conclusion: The Auditor determined through review of policies and staff interviews, the facility meets the provisions of the standard.</p>
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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

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 required if staff learn 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.

115.63	Reporting to other confinement facilities
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 946 376">115.63 Reporting to other Confinement Facilities</p> <p data-bbox="256 409 1091 443">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p data-bbox="256 488 564 521">Screening Instrument</p> <p data-bbox="256 555 544 589">Email of Notification</p> <p data-bbox="256 622 405 656">Interviews</p> <p data-bbox="256 701 1430 801">CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention PAQ</p> <p data-bbox="256 913 1477 1193">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 copies of this documentation will be forwarded to the PREA Coordinator.</p> <p data-bbox="256 1238 1477 1473">When a PREA allegation is received by 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. All documents related to the allegation must be made available to the PREA manager for review.</p> <p data-bbox="256 1518 1477 1966">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. The Warden and PM stated that if they receive such a notice, they will immediately report the allegation to the Warden of the transfer facility 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. The Warden indicated utilizing the described protocol and all correspondence is tracked and documented.</p> <p data-bbox="256 2011 1442 2089">Conclusion: Compliance with this standard was verified by reviewing policies, documentation, and conducting interviews. The Auditor determined that the facility</p>

	meets the requirements of this standard.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.64 Staff First Responder Duties</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Staff Response Guide</p> <p>SIR Packet</p> <p>Staff training</p> <p>Specialized Medical Training</p> <p>PREA Lesson Plan</p> <p>Coordinated Response Plan</p> <p>Sexual Assault Checklist</p> <p>Investigator Training</p> <p>Interviews</p> <p>NENMCF policy requires that if the first responder at the scene of a sexual assault 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. The facility maintains compliance with this standard and provides specialized training to staff. Facility staff are adequately trained to respond to sexual abuse incidents and receive PREA refresher training annually.</p> <p>The Auditor conducted interviews with supervisory staff to determine their role following a report of sexual assault. Supervisors stated they would ensure the alleged victim and perpetrator 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 disturb the evidence. The alleged victim would be taken to</p>

	<p>medical for treatment of any emergency needs and if required, transported to the local hospital for a forensic exam.</p> <p>Staff listed as first responders stated during interviews with the Auditor that they were aware of their responsibility regarding their duties if staff first on a scene. A review of the investigation files supported that staff responding to an allegation of sexual abuse take the appropriate steps to separate the victim from alleged abuser, preserve the crime scene, protect evidence, and document events.</p> <p>Medical personnel interviewed stated they would ensure a victim's emergency 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 to a local hospital for a forensic exam if required.</p> <p>The Auditor reviewed the facility's training records for verification that sexual abuse training had been conducted and documented. The training records of staff, contractors, and volunteers verified they had received PREA training on how to respond to incidents of sexual abuse. The Auditor determined the facility has trained their staff in their responsibilities as a first responder during a sexual abuse incident. Staff interviewed as part of this onsite audit visit were well versed in their responsibilities as a first responder to an allegation of sexual abuse or sexual harassment.</p> <p>Conclusion: The Auditor reviewed policies, procedures, coordinated response plan, investigative reports, interviewed staff, and determined the facility meets the requirements of this standard.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.65 Coordinated Response</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Sexual Assault Checklist</p> <p>Staff training</p> <p>NMCD-150102 Coordinated Response Plan</p>

	<p>Interviews</p> <p>Coordinated Response Plan</p> <p>Standard 115.65 requires each facility to develop a written plan to coordinate actions taken in response to an incident of sexual abuse. NENMCF has developed procedures for the coordinated response plan that initiates an immediate action. NENMCF policy describes the procedures employed by the facility when responding to allegations of sexual abuse incidents. A Sexual Assault first responder checklist supplements the facility operating procedures and outlines staff duties in response to a sexual assault incident.</p> <p>NENMCF 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 facility 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.</p> <p>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. Staff understood their responsibilities and stated that investigations are completed in a timely manner. They stated that cases may be referred to 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 an investigation determination is made.</p> <p>Conclusion: The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained their personnel. Based on a review of the facility's policies, procedures, coordinated response plan, training records, and interviews with staff, the Auditor determined that facility meets the requirements of this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66 Preservation of Ability to Protect Inmates from Contact with Abusers</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Interviews</p>

	<p>Council 18 Agreement-AFSCME</p> <p>PAQ</p> <p>Memo</p> <p>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. Specifically, when warranted, the facility may take actions that include suspension of an employee during an investigation, and this suspension may continue until disciplinary actions can be determined. The Warden confirmed that the facility maintains the right to assign staff.</p> <p>This Auditor confirmed that the agency has the right and ability as the employer to remove alleged staff abusers from contact with inmates. The employer may take actions that include suspension of an employee during an active investigation and suspension is effective until a case determination can be determined.</p> <p>Conclusion: The Auditor determined the facility is compliant with this standard and meets the requirements.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.67 Agency Protection Against Retaliation</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Investigative Reports</p> <p>Retaliation Monitor List</p> <p>CD 150102.2-Retaliation Monitoring Form</p> <p>Interviews</p> <p>NMCD policies are written in accordance with PREA standard 115.67 and 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</p>

	<p>investigations will be protected from retaliation from staff and inmates. The facility designates a supervisory staff member other than the direct supervisor, to monitor the incident. The staff member assigned will monitor retaliatory performance reviews, reassignments, and other retaliatory actions that may be questionable. Any use of involuntary segregated housing for the inmate who is alleged to suffer sexual abuse will only be used after an assessment deems necessary.</p> <p>Staff stated the PM monitors staff and inmates' retaliation for up to 90 days and if necessary, 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 with possible transfer. Options to protect against retaliation may include protective custody, housing reassignments, or transfer to another facility.</p> <p>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. Retaliation will be grounds for disciplinary action and will be investigated. Any individual who cooperates with an investigation expresses and expresses fear of retaliation, measures to protect that individual against retaliation will be taken. It is noted that retaliation monitoring will cease if an allegation is unfounded.</p> <p>Administrative staff have the authority to move inmates within the facility or to request transfers to other facilities to prevent inmate retaliation. 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.</p> <p>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 meets this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68 Post-Allegation Protective Custody</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD 141100 Protective Custody</p> <p>Risk Screening</p>

	<p>CD-141500 Restrictive Housing</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>RHU Administrative Segregation Roster</p> <p>Interviews</p> <p>The NENMCF'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.</p> <p>The Auditor determined during document review, that inmates have not 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.</p> <p>Interviews with supervisory staff confirmed their knowledge of their responsibility to protect an inmate after their allegation of abuse. There were no instances where protective custody was used at this facility and none of the inmates interviewed had been placed in restrictive housing for their protection from sexual abuse.</p> <p>Conclusion: The Auditor reviewed policy and documentation, interviewed supervisory staff, and made observations. The Auditor determined the facility meets this standard.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.71 Criminal and Administrative Agency Investigations</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD - 031800 Investigations - Inquiries and Administrative Investigations</p> <p>Interviews</p>

Investigative Packets

Investigator Training Records

PAQ

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

NENMCF 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 immediately, thoroughly, and objectively to include third party and anonymous reports. Policy states that when an allegation of sexual abuse or sexual harassment is received verbally or in writing, it will be investigated. Staff will ensure all allegations are referred to NMSP in accordance with policy and the facility's directives. Referrals to NMSP will be documented in the facility's investigative report, PREA investigation, and SRNS 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 incident. Facility policy requires that all reports, regardless of their source of origination, be referred for investigation and if criminal in nature, will be referred to the NMSP. The facility conducts investigations on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. It is the responsibility of the facility PREA Manager, with the assistance of the facility investigators to gather and preserve circumstantial evidence, including any physical evidence, and DNA evidence. Investigators will interview victims, perpetrators, witnesses, and review prior reports of sexual abuse involving any parties involved.

A facility investigator acknowledged that investigations are required to be initiated within 72 hours of being reported and facility normally initiates it in 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 immediately. 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 and findings.

Credibility assessments are conducted as part of the investigative process by the investigators 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, plus an additional time in accordance with NMCD directives. 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

	<p>the primary criminal investigative unit for the NMCD for conducting criminal investigations.</p> <p>Conclusion: The Auditor review of policies, investigative reports, conducted interviews, and determined the facility meets requirements for this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.72 Evidentiary Standard for Administrative Investigations</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>NMCD Policy CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>NMCD - 031800 Investigations - Inquiries and Administrative Investigations</p> <p>Investigators' Certifications</p> <p>Investigations</p> <p>Interviews</p> <p>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 at NENMCF 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 articulate what preponderance meant and how they arrive at the basis of case determinations. The Auditor reviewed investigation files that included documentation for the case outcomes.</p> <p>Conclusion: Based on policy review, investigative file review, and interviews, the Auditor determined the facility meets the requirements of this standard.</p>

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

Closing Letter Notification

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 in a facility, the facility Warden will ensure the victim is notified in writing as to whether the allegation has been Substantiated, Unsubstantiated/Insufficient Evidence, or Unfounded.

NMCD policy CD-150100 states that following an investigation of sexual abuse of an inmate, the inmate will be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The PREA Manager is responsible for preparing the Closing Letter and forwarding to the alleged victim for their 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 the case determination and notifications will be documented. If notification is unable to be provided, the attempts will be documented as well as the rationale for the inability to notify. The facility's obligation to provide notification will terminate if the inmate is paroled, discharged from their sentence, or pardoned.

NENMCF provided examples of Inmate notification of sexual abuse and sexual harassment investigative outcomes and Closing Letter. Inmates are notified regarding investigative findings, sufficient evidence findings-staff suspect disciplinary action, staff housing unit assignment, change of work venue, indicted on a charge related to the allegation, or convicted on a charge related to the allegation. Document reviews and interviews with the PM, administrative staff, investigators, and inmates, verified notifications are being made as required by policies.

Conclusion: The Auditor determined the facility meets compliance with the standard.

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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.76 Disciplinary Sanctions for Staff</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>CD 037800 Disciplinary Actions</p> <p>CD-032200 Code of Ethics</p> <p>CD-031800 OPS Investigations and Staff Misconduct</p> <p>Interviews</p> <p>Employee Handbook</p> <p>PAQ</p> <p>NMCD policy is following the requirements of PREA Standard 115.76. Staff found guilty of violations are subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policy. The policy requires that staff found guilty of sexual abuse of an inmate will be terminated from employment. 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.</p> <p>These cases will be referred to NMSP for criminal investigation for prosecution. 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.</p> <p>The Warden stated if a staff member is terminated for violating the facility's sexual assault and harassment policy, the case would be referred for criminal prosecution if criminal in nature. 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</p>

	<p>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.</p> <p>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.</p> <p>Conclusion: The Auditor determined the facility meets compliance with the standard.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.77 Corrective Action for Contractors and Volunteers</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Contractor and Volunteer Training Verification</p> <p>CD-060200- Citizen and Volunteers Involvement</p> <p>CD-031800 OPS Investigations and Staff Misconduct</p> <p>CD-037800 Disciplinary Action for Classified Employees</p> <p>CD-100200 Inmate Visitation</p> <p>Staff Rosters</p> <p>PAQ</p> <p>NMCD policy hold contractors and volunteers to the same standards as employees when disciplinary action for engaging in sexual abuse and sexual harassment. 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 and sexual harassment policies. Conduct of this nature by volunteers or contractors</p>

	<p>requires reporting to law enforcement, relevant licensing bodies, and possible criminal charges.</p> <p>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.</p> <p>Once an investigation is initiated involving a contract employee, the contract monitor will be notified. Contractual employees who are the subject of the investigation will be permitted to have legal representation during the investigatory interview. The investigator must advise the employee of this and arrange a date and time for the meeting to occur that does not delay the investigation. The contract employee is responsible for obtaining their representative and that person cannot be an NMCD employee.</p> <p>An interview with the Warden confirmed that any contractor or volunteer who violates sexual abuse or sexual harassment policies would be removed from inmate contact and the facility. 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.</p> <p>Conclusion: The Auditor reviewed documentation, policy, and conducted interviews. The Auditor determined the facility meets the standard.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.78 Disciplinary Sanctions for Inmates</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Interviews</p> <p>CD-040100- Inmate Records</p> <p>CD-090100- Inmate Discipline</p> <p>CD-176100- Patient rights and Responsibilities</p>

	<p>Investigative Reports</p> <p>Inmate Handbook</p> <p>NMCD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>The NENMCF 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. NMCD policy states that inmates who engage in consensual sexual activity may be disciplined and sanctioned accordingly. However, the activity will not be considered sexual abuse unless it is determined that sexual contact was the result of coerced consent or protective pairing.</p> <p>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.</p> <p>A review of facility investigations 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. There is consideration by staff for mental disabilities and mental illness when considering the appropriate type of sanction to be imposed. Agency policy directs facilities offering relevant treatment programs address the underlying reasons or motivations for abuse and consider placing inmates in relevant programs.</p> <p>Conclusion: Based on policy reviews and interviews, the Auditor determined the facility meets the requirements of this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.81 Medical and Mental Health Screenings; History of Sexual Abuse</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Mental Health Services</p>

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

Albuquerque SANE Collaborative

Interviews

CD-180201.1-Authorization for Release of Information Form

HRSA/HRSV Roster

NMCD policy states that if a PREA risk assessment 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 and mental health staff 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 to medical. NENMCF 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 for the history of sexual abuse, a risk screening form is to be completed by staff as part of the initial intake and mental health staff are available to provide mental health services. 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. NENMCF 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. Files of inmates who were identified as needing follow-up care, had been

	<p>seen and confidentiality forms were present. Medical staff and mental health staff confirmed that if an inmate reveals previous victimization, they are referred to mental health and the inmate is offered a follow-up meeting.</p> <p>The facility displayed signage throughout the departments of 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.</p> <p>Conclusion: Based on interviews with medical staff, mental health, and document review, the Auditor determined the facility meets the requirements of this standard.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.82 Access to Emergency Medical and Mental Health Services</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Mental Health Services</p> <p>Staff Response PREA Card</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>Risk Screenings</p> <p>SANE Protocol</p> <p>CD-170100 Medical Clinical Services</p> <p>Albuquerque SANE Collaborative</p> <p>Interviews</p> <p>The 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.</p>

If no qualified medical or mental health staff are on duty at the time an allegation of recent abuse is made, 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 and 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 would receive timely, unimpeded access to these services and staff are aware of their responsibilities regarding protection of the victim and evidence in the case of a report of sexual assault. In addition, medical and mental health facility staff are available 24 hours per day in case of emergency and/or for crisis intervention services. Psychology staff will initiate contact with the victim and provide evaluation and treatment as required.

For services that are outside the scope of their experience, the inmate can be treated at the local hospital. Qualified forensic nurse examiners located off-site, conduct forensic exams and Albuquerque SANE Collaborative will provide a representative at the request of the inmate for emotional support services.

NENMCF 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 and review of the facility investigations, 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 this standard.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83 Ongoing Medical and Mental Health care for Sexual Abuse Victims and Abusers</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Mental Health Services</p> <p>CD-150100, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention</p> <p>CD-170800 Medical Records</p> <p>CD-180200 Behavioral Health Clinical Service</p> <p>Interviews</p> <p>Sane Protocol</p> <p>CD-170100 Medical Clinical Services</p> <p>SIR</p> <p>NMCD policy state 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.</p> <p>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,</p>

	<p>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.</p> <p>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. During review of facility investigations, the Auditors found that appropriate referrals and treatment are being completed in accordance with the standard.</p> <p>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.</p> <p>NENMCF policy states that when 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.</p> <p>The Auditor interviewed mental health staff who confirmed that counseling sessions, referrals if appropriate, and follow-up services are provided.</p> <p>Conclusion: The Auditor reviewed policies, procedures, inmate records, interviewed inmates, SANE, and medical/mental health practitioners, and determined the facility meets the requirements of this standard.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 Sexual Abuse Incident Reviews</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>SART Manual</p> <p>Investigations</p>

	<p>CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Interviews</p> <p>NENMCF policy directives require 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 staff to include the DON, Major, Captain, behavioral health staff and facility manager.</p> <p>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, staffing, and the Warden would review the recommendations. Administrative and criminal investigations are completed on allegations of sexual abuse and NMSP conduct all criminal investigations. The PM stated any recommendations would be implemented, or the reasons for not doing so would be documented. A written report of findings is prepared and maintained by the facility PM.</p> <p>Conclusion: Review of incident review forms and interviews with the Warden, PM, and team member, was conducted. The Auditor determined the facility meets requirements for this standard.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.87 Data Collection</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>PAQ</p> <p>SSV-2023</p> <p>NMCD Annual Reports</p> <p>Interviews</p> <p>CD-150100 Abuse/Sexual Harassment Prevention and Intervention</p>

	<p>NMCD Website-www.cd.nm.gov</p> <p>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 Survey of Sexual Violence and complete an annual report based upon the statical data.</p> <p>Policy outlines the data collection process and states that allegations of sexual abuse reported to have occurred within facilities will be entered into their 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.</p> <p>The Auditor reviewed the Annual Report available on the facility website which includes the comprehensive annual report lists and corrective actions. The report is approved by the agency administrative staff and the PC prior to publishing on the agency's website.</p> <p>The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, 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.</p> <p>Conclusion: The Auditor reviewed the Annual Reports, data collected, and interviews with PC. The Auditor determined the facility meets the requirements of this standard.</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.88 Data Review for Corrective Action</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Corrective Action Memo</p> <p>CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention</p> <p>NMCD Annual PREA Data Report</p> <p>NMCD Website</p>

	<p>Interviews</p> <p>The facility PAQ confirms the agency reviews data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policy, and training. The review includes identifying problem areas, taking corrective action, preparing an annual report that includes any corrective action. A review of the annual reports indicates that the report contains information on NENMCF's PREA efforts to include the actions taken in response to the previous year's PREA audits.</p> <p>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, the Annual Report, the Survey of Sexual Victimization, 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, issues or problematic areas are a priority and, if discovered, corrective action is initiated.</p> <p>The PAQ indicated that the agency's annual report is approved and made available to the public through its website. The interview with the PC confirmed that after it is approved 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.</p> <p>A review of the website: HTTP://www.cd.nm.gov verified that the annual report is available online to the public.</p> <p>Conclusion: Based on interviews, reviews of the agency website and documents, the Auditor finds this standard compliant and meets requirements.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.89 Data Storage, Publication, and Destruction</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>CD-150100 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention</p> <p>NMCD Website</p> <p>Interviews</p>

	<p>NMCD policy mandates that aggregated sexual abuse data from facilities under its direct control and private facilities with which it 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. 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.</p> <p>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 the annual historical 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 unique username and password to access.</p> <p>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.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 Frequency and Scope of Audits</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Interviews</p> <p>Institutional tour</p> <p>Documentation Review</p> <p>The Auditor had access to all areas of the facility and was permitted to receive and copy any relevant policies, procedures, or documents requested. The Auditor conducted private interviews and was able to receive confidential information/ correspondence from inmates. Policies and secondary documentation were provided</p>

	<p>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.</p> <p>Prior to the on-site review, emails with the Auditor's contact information were sent to the facility to be posted in inmates common areas advising of the audit dates. These notices were sent to the agency and facility staff for posting six weeks prior to the onsite visit and were observed posted in various areas of the facility.</p> <p>Conclusion: The Auditor determined this standard to be compliant and meets requirements.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.403 Audit Contents and Findings</p> <p>The report for NENMCF is publicly available at the NMCD website: https://www.cd.nm.gov</p>

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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
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 with inmates with disabilities including inmates who: Have intellectual disabilities?	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: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
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 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
	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	yes

	U.S.C. 1997)?	
	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.)	no
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,	na

	whichever is later.)	
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).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with	yes

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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	yes

	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)?	
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 Garrity warnings? (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 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	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
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 suspicions 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
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 screening instrument?	yes
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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) Whether the inmate is detained solely for civil immigration purposes?	yes
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 information is not exploited to the inmate's detriment by staff or other inmates?	yes
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	yes

	being sexually abusive, to inform: Work Assignments?	
	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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
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 anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	na

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	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 this standard.)	yes
	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	yes

	is exempt from this standard.)	
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, 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.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
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 abuse or sexual harassment or retaliation?	yes
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	yes

	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?	
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 response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities	yes

	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?	
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 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?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	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 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).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	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).)	
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

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

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
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 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?	yes

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 evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does	yes

	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.)	
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 sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
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	yes

	has been determined to be unfounded?	
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	

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

(b)		
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
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 (f)	Audit contents and findings	
	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	yes

	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.)	
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