

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



<b>Name of facility:</b>		Northeast New Mexico Detention Facility (NENMDF)	
<b>Physical address:</b>		185 Dr. Michael Jenkins Road Clayton, NM 88415	
<b>Date report submitted:</b>		May 28, 2014	
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<b>Date of facility visit:</b>		April 30 – May 2, 2014	
<b>Facility Information</b>			
<b>Facility mailing address:</b>		Same as above	
<b>Telephone number:</b>			
<b>NENMDF is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
<b>Name of PREA Compliance Manager:</b>		<b>Title:</b>	Compliance Manager
Rebecca Hatch			
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<b>Agency Information</b>			
<b>Name of agency:</b>		GEO Group Inc.	
<b>Governing authority or parent agency:</b>			
<b>Physical address:</b>		One Park Place, Suite 700 621 NW 53 <sup>rd</sup> St Boca Raton, Florida 33487	
<b>Mailing address:</b>		Same as above	
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# AUDIT FINDINGS

## **NARRATIVE:**

The audit of Northeast New Mexico Detention Facility was conducted on April 30 – May 2, 2014 by Katherine Brown, Certified PREA auditor. The areas toured were a total of 11 housing units. There are 10 general population units and one administrative detention/segregation unit Housing 41 inmates. Housing Unit One and Housing Unit Two each have one control center. Each unit has five dayrooms, 146 double bunked general population cells split on two levels for a total of 292 (584 combined total). Housing Unit Three (segregation) has 41 single bunk cells split on two levels. Plus the kitchen, laundry, programs area, and work areas.

An entrance meeting was held with facility staff. The following people were in attendance: Warden Hatch; Asst. Warden Vincent Horton; Asst. Warden Lynwood Baade; Facility PC Managers Rebecca Hatch and Dan Hutchinson; Asst Director of Operations Dawn Zobel; Western Region Director Contract Compliance Cynthia Armant; Corporate PREA Manager Jennifer Shaw; Corporate PREA Coordinator Phebia Moreland.

Following the entrance meeting I toured the Northeast New Mexico Detention Facility from 3:00 pm till 6:00 pm. On the tour with me was Warden Hatch; Asst. Warden Vincent Horton; Asst. Warden Lynwood Baade; Facility PC Managers Rebecca Hatch and Dan Hutchinson; Asst. Director Of Operations Dawn Zobel; Western Region Director of Contract Compliance Cynthia Armant; Corporate PREA Manager Jennifer Shaw; Corporate PREA Coordinator Phebia Moreland. Marion Morgan Senior Program Specialist with National Council on Crime and Delinquency was an observer of the PREA process.

I asked for an alpha listing of all inmates housed at NENMDF and randomly selected one inmate from each housing unit as well as any inmates who were limited English speaking or had hearing/vision impairment to be interviewed. There were no hearing/vision impairment inmates, I did interview five limited English speaking inmate. I interviewed three gay men, there were no transgender/intersex. I also asked for a shift roster and randomly selected 11 staff to interview. I also reviewed 5 Human Resource personnel files; 1 Contractor file and 1 volunteer file, as well as medical records and mental health records.

There were 17 sexual assault/harassment allegation cases, all relatively recent (within the past year) four had been unfounded and eight against a contracted employee are still open cases, and five unsubstantiated.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Northeast New Mexico Detention Facility (NENMDF) is a 179,264 square foot private prison located on 70 acres. It is located 4 miles east of Clayton New Mexico, between State Highway 7 and State Highway 56/64. This level III state facility is owned by the town of Clayton and operated by the GEO Group, Inc.

Construction of NENMDF began in 2006, and NENMDF received its first inmates on August 4, 2008. The mission of the Northeast New Mexico Detention facility is to confine offenders in a safe, humane, and secure environment, to provide positive self-improvement opportunities for staff and inmates: and to establish and maintain a safe, supportive workplace for all employees.

NENMDF is comprised of two main buildings; the Administration Building which contains business support functions, NENMDF armory, NENMDF training room, employee wellness center, Senior Administrative staff offices, conference room, inmate records room, video and phone monitoring room and the main control room. The Administration building is located outside the secure perimeter. The second building, which is located inside the secure perimeter, contains inmate housing and programming areas. Additionally it contains the intake area, the secondary control center, supply/warehouse, laundry, food service, warehouse, a staff dining hall, visitation, medical, unit management staff and offices, security and segregation.

NENMDF has one support building which houses the physical plant management team. Housing Unit One and Housing Unit two each have one control center. Each unit has five dayrooms, 146 double bunked general population cells split on two levels for a total of 292 (584combined total). Housing Unit Three (segregation) has 41 single bunked cells split on two levels. Housing Units One and Two are connected to the two service buildings by an activity unit.

NENMDF contains one gym, one commissary, three mental health offices, and one residential drug and alcohol activity room, one education resource center, eight case worker offices, one computer lab, a facility chapel, six standard classrooms and three vocational classrooms.

Outdoor general population recreation areas consist of two basketball courts, four handball courts, and a softball field and weight equipment. Segregation recreation consist of eight activities. These areas are covered in the event of inclement weather.

#### **SUMMARY OF AUDIT FINDINGS:**

On April 30 – May 2, 2014, three site visits were completed at Northeast New Mexico Detention Facility in Clayton New Mexico. The results indicate Northeast New Mexico Detention Facility:

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 1

**Standard number here** 115.11 Zero Tolerance

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outline the agency's approach to preventing, detecting, and responding to such conduct. Based on policy 5.1.2. III. B. 1 2

The agency employs an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards.

Based on interviews with PREA Coordinator and PREA compliance manager. Review of Organizational Chart

**Standard number here** 115.12 Contracting with other agencies for confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Any contracts provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

Based on policy 5.1.2.A. III. A. 5 (a-b). Based on interview with agency's contract compliance manager and contract with Otero County and GEO. There have been no new contracts.

**Standard number here** 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. NENM P&P 12.000 C. 1. (a-g) ; Post Order 22 II J&K. The agency has developed, documented, and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing uses video monitoring, to protect inmates against sexual abuse.

In circumstances where the staffing plan was not complied with, NENMDF documented and justified all deviations from the plan.

The Agency completes an annual review, in consultation with the PREA coordinator required by § 115.11. Based on interview with Warden: PREA Compliance Manager and PREA Coordinator. Reviewed: staffing plan and shift activity reports, PREA annual facility assessment dates November 18, 2013. 62 times plan was deviated from and OT was used, duty officers report showing unannounced rounds.

<b>Standard number here</b> 115.14 Youthful inmates
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- X. Not Applicable

**Auditor comments, including corrective actions needed if does not meet standard**

NENM does not house youthful offenders. They are housed at Community Confinement facilities.

<b>Standard number here</b> 115.15 Limits to cross gender viewing and searches
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

NENMDF does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. In the event a cross gender search is done NENMDF documents all cross-gender strip searches and cross-gender visual body cavity searches.

NENMDF has policies and procedures that enable 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. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit. Based on policy 5.1.2. A. III. I. 1-8; NENM P&P 12.000 pg. 15 I. 1,2,6,7 & 8; NENM P&P 08.008 C&D pg. 5 (a-j). Showers are in full view of female staff members from the vestibule, control room and STIU monitoring cameras.

During the Corrective Action Period all showers were redesigned and now provide privacy from opposite gender viewing.

NENMDF does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it is determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

The agency trains security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Lesson plan dated 10/2/09; PREA Orientation 3/18/14; log book entries showing announcement made.

**Standard  
number here**

115.16 inmates with disabilities and limited English speaking

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. E. 1 (a-c) NENM P&P 12.000 pg. 10 (c ). Based on random inmate and staff interviews and interview with limited English speaking inmates. Pamphlet in English & Spanish; video; TDD machine; memo dated 10/4/13 Spanish Interpreters; Reviewed progress notes 10/7/13 on an inmate of sexual assault. The agency takes appropriate steps to ensure inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

During Corrective Action Period the PREA video was redone and they did a voice over in Spanish to meet the standard. The video is played during the comprehensive education which takes place about a week after intake. The videos are played depending on the audience's needs.

The agency takes reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates

who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Based on the interviews conduct with the Limited English speaking inmates it was discovered that the ones who speak no English did not know what PREA was and could not answer any of the questions on the interview questionnaire.

The agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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.

<b>Standard number here</b> 115.17 Hiring and promotion decisions
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. C 2, (a-d) and H 4 (a-c) ; NENM 12.000 pg. 7 C. v 2 (c ) .Based on interview with Human Resource Director review of personnel files; and Hiring packet with PREA questions.

The agency does not hire or promote anyone who may have contact with inmates, and does not enlist the 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, 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; or has been civilly or administratively adjudicated to have engaged in the activity described above.

The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

The agency performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates. Review of personnel files and checks of criminal records being performed and five year background checks being redone. Reviewed candidate resume questionnaire; background release form; Disclosure & Consent. Reviewed Annual performance evaluation authorization form.

The agency conducts 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.

**Standard number here** 115.18 Upgrades to facilities and technology

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. C – 3; NENM P&P 12.000 pg. 8 C-3 Based on interview of agency head and warden.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse. There have been no substantial or modifications to existing facilities.

**Standard number here** 115.21 evidence protocol and forensic medical exams

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. E. III. A 3 (b-d); NENM P&P 12.000 pg. 18 I 2 (b-e) 3, 8 &9; NM Corrections Department CD 150102 A. Based on interview with PREA compliance manager.

To the extent the agency is responsible for investigating allegations of sexual abuse, the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

The agency offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. MOU between NENM & Christus St. Vincent Regional Medical Center Sante Fe NM 11/20/13; MOU between NENM and Tri-County Community Services, Inc. 7/24/13.

The agency documents its efforts to provide SAFEs or SANEs.

The agency makes available to the victim a victim advocate from a rape crisis center. If a rape crisis center

As requested by the victim, a victim advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

The agency shall request that the investigating agency follow the requirements listed above. Clayton Police Department collects all evidence.

<b>Standard number here</b> 115.22 referrals of allegations for investigations
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Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. E. III. A-1 a. 5.1.2. A. III. A-2; NENM P&P 12.000 A.2; NM DOC CD 031800 & CD 031801. Based on interview with agency head and investigative staff; reviewed investigations.

The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

The agency has a policy that ensures 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. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency documents all such referrals.

Investigations are done by NM Department of Corrections and Clayton Police Department. Viewed policy on website.

<b>Standard number here</b> 115.31 Employee training
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Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. F. 1. (a-f) ; NENM P&P 12.000 pg.11& 12 F. 1. (a- c);  
Based on interview with random staff and review of lesson plan PREA Orientation;  
Training sign in sheet . The agency trains all employees who have contact with inmates  
on:

- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Inmates' right to be free from sexual abuse and sexual harassment;
- (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;
- (6) The common reactions of sexual abuse and sexual harassment victims;
- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with inmates;
- (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The training is tailored to the gender of the inmates at the facility. The employee receives additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.

The agency documents, through employee signature or electronic verification, that employees understand the training they have received.

<b>Standard number here</b> 115.32 Volunteer and contractors training
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. G. 1 (a-e) & H. 1 (a-f) ; NENM P&P 12.000 pg.13 G&H 1.(b); and based on interview with volunteer and contractors. Lesson Plan; Volunteer roster; training acknowledgement. The agency ensures 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.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

The agency has documentation confirming that volunteers and contractors understand the training they have received.

<b>Standard number here</b> 115.33 Inmate education
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. E. 2 (a-j); NENM 12.000 pg. 11 E.2. (a-g). Based on interview with random inmates and intake staff. Review of Inmate Handbook and signature page on clothing & hygiene issuance log. Reviewed Orientation manual; PREA Orientation and Video signed acknowledgement; and Video script. During the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Within 30 days of intake, the agency provides a comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

The agency provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. There is documentation of inmate participation in these education sessions. Based on the interviews conducted with the Limited English speaking inmates it was discovered that the ones who speak no English did not know what PREA was and could not answer any of the questions on the interview questionnaire.

During Corrective Action Period the PREA video was redone and they did a voice over in Spanish to meet the standard.

<b>Standard number here</b> 115.34 Specialized training: Investigators
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III F. 3 a-c; NENM 12.000 pg.12 F. 3.a.; Based on interview with investigative staff. Review of Training Curriculum and Training certificates. In addition to the general training provided to all employees the agency ensures that, the in-house investigator have received training in conducting such investigations in confinement settings.

Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

<b>Standard number here</b>	115.35 Specialized training: Medical and mental health care
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. F. 2 (a-d); NENM 12.000 pg. 12 F. 2. (a).; Training attendance record; Lesson Plan Forensic Medical Exam Training for Correctional Medical/Mental Health Staff with Acknowledgement signature page. 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; preserve physical evidence of sexual abuse; respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The agency maintains documentation that medical and mental health practitioners have received the training.

Medical and mental health care practitioners also receive the training mandated for employees under 115.31 or for contractors and volunteers under § 115.32.

<b>Standard number here</b>	115.41 Screening for risk of victimization and abusiveness
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. D-1 (a-g); NENM 12.000 pg. 8 D.1.(a –f) Based on interview with random inmates and intake staff responsible for screening. Only limited staff have access to the risk screening form only Medical, Mental Health and Warden as well as PREA Manager. All Risk Assessments are maintained in inmate files and are kept locked.

All inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

Intake screening shall ordinarily take place within 72 hours of arrival at NENMDF.

Such assessments shall be conducted using an objective screening instrument.

The intake screening shall 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;
- (2) The age of the inmate;
- (3) The physical build of the inmate;
- (4) Whether the inmate has previously been incarcerated;
- (5) Whether the inmate's criminal history is exclusively nonviolent;
- (6) Whether the inmate has prior convictions for sex offenses against an adult or child;
- (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (8) Whether the inmate has previously experienced sexual victimization;
- (9) The inmate's own perception of vulnerability; and
- (10) Whether the inmate is detained solely for civil immigration purposes.

The New Mexico Department of Corrections Sexual Risk Indicator Screening form does not include whether the inmate is perceived to be gay, lesbian, bisexual, transgender, and intersex or gender nonconforming. During the Corrective Action Period the NMDOC Sexual Risk Indicator Screening form was revised to include #7.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

Within 30 days from the inmate's arrival at NENMDF, NENMDF reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by NENMDF since the intake screening.

An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Inmates are not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked.

The agency implements appropriate controls on the dissemination within NENMDF 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.

**Standard  
number here**

115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. D. 1 (c-d) 3 (a-c) ; NENM 12.000 pg. 9 D.3.(a-c), 10 , 10 D.3.(c-f). Based on interview with PREA compliance manager and staff responsible for risk screening. Sexual Risk Indicator Screening. The agency uses information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

The agency makes individualized determinations about how to ensure the safety of each inmate.

In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

Placement and programming assignments for each transgender or intersex inmate is reassessed at least twice each year to review any threats to safety experienced by the inmate.

A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

The agency does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

**Standard  
number here**

115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. J. 1 (a-f); NENM 12.000 pg. 16 J. 1 (a, d-f) Based on interview with warden, staff who supervise segregated inmates. No inmate has been placed in involuntary segregation. Inmates at high risk for sexual victimization are not placed 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.

Inmates placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If NENMDF restricts access to programs, privileges, education, or work opportunities, NENMDF documents: the opportunities that have been limited; the duration of the limitation; and the reasons for such limitations.

NENMDF assigns such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

If an involuntary segregated housing assignment is made NENMDF shall clearly document the basis for NENMDF's concern for the inmate's safety; and the reason why no alternative means of separation can be arranged.

Every 30 days, NENMDF affords each such inmate a review to determine whether there is a continuing need for separation from the general population.

<b>Standard number here</b> 115.51 Inmate reporting
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Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III K. 1 (a-c); NENM 12.000 pg. 16 K. 1. (a-d,); Based on interviews with random staff and inmates. Review of Inmate Handbook page 54; Reviewed investigative file dated 9/21/13 ref: 76897 where report was written in Spanish and translated. The agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request.

Staff accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

<b>Standard number here</b> 115.52 exhaustion of administrative remedies
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. K. 2 (a-d); NENMM 12.000 pg. 16 & 17 K. 2 (a) (2, 6-8); Inmate Handbook page 42 & 43. There have been no 3<sup>rd</sup> party reports or emergency grievances. The agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.

The agency does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

The agency ensures 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, and such grievance is not referred to a staff member who is the subject of the complaint.

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.

Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.

The agency has established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency immediately forwards 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 is taken, and provides an initial response within 48 hours, and issues a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in

substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

<b>Standard number here</b> 115.53 Inmate access to outside confidential support services
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. L -8 (a-b) ; NENM 12.000 pg. 22 8 (a-b). Based on interview with random inmates and inmates who reported sexual assault. MOU with Tri County Community Services. NENMDF provides 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. NENMDF enables reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

NENMDF informs 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.

The agency maintains a 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. The agency maintains copies of agreements.

<b>Standard number here</b> 115.54 Third party reporting
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III K-3; NENM 12.000 pg. 17. 3; Inmate Handbook pg. 53&54; GEO Website. The agency has a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.

**Standard number here** 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. K. 4 (a-c); NENM 12.000 pg. 17 4. a. (1-3) 4. (c ).; NENM 12.000 pg. 18 4 ( c ) Based on interviews with random staff; warden and medical/mental health staff. The agency requires 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

If the alleged victim is under a State or local vulnerable person’s statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

NENMDF reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to NENMDF’s designated investigators.

**Standard number here** 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. L. 1; NENM 12.000 pg. 18 L. 1. a. Based on interviews with random staff, and warden as well as reviewed incident reports. When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.

**Standard  
number here**

115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. L 5 (a-c); NENM 12.000 pg. 21 5. (a-b) Based on interview with agency head and warden and Inmate Informal Complaint 02-14-51. Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of NENMDF that received the allegation shall notify the head of NENMDF or appropriate office of the agency where the alleged abuse occurred.

Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

The agency documents that it has provided such notification.

NENMDF head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

**Standard  
number here**

115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III L-2 (a-f); 5.1.2. E. III D 1-4; NENM 12.000 pg. 18 L. 2 (a-f) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall:

- (1) Separate the alleged victim and abuser;
- (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and
- (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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 first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

Based on interview with security staff who are first responders, random staff and inmates who reported sexual abuse and review of Incident Reports.

<b>Standard number here</b> 115.65 Coordinated response
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III A-4, L3; NENM P&P 12.000 A.4. Based on interview with warden and Facility Response Checklist. NENMDF has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

<b>Standard number here</b> 115.66 Preservation of ability to protect inmates from contact with abusers
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. A. 3 (b); 5.1.2. E. III. A 2 (a); NENM P&P 12.000 A.3 (b) Based on interview with agency head. The agency does not participate in collective bargaining

<b>Standard number here</b> 115.67 Agency protection against retaliation
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III. M 2 (a-f); NENM 12.000 pg.23 2 (a-b) pg. 24 2. (i). Based on interview with agency head, warden, designated staff member with monitoring retaliation; inmates in segregation for risk of sexual victimization. Reviewed Retaliation Log; Mental Health Notes. The agency has 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, and shall designate which staff members or departments are charged with monitoring retaliation.

The agency has 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.

For at least 90 days following a report of sexual abuse, the agency monitors the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

In the case of inmates, such monitoring includes periodic status checks.

If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

<b>Standard number here</b> 115.68 Post allegation protective custody
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III L 6; NENM 12.000 pg. 16 J. 1(a-f) pg. 21 6. Based on interview with warden. No inmate has been placed in involuntary segregation. Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of 115.43

<b>Standard number here</b> 115.71 Criminal and administrative agency investigation
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. E. III B 1 (d) and (b) 2 (a-h); NENM 12.000 pg. 5 B.1.(d-g) & 2; pg. 5 1. K; pg. 6( b). 2. (e ); pg. 6 2. j.; pg. 26 O. 1 (a-c); NMCD 150100 & 31800  
Based on interview with investigative staff. Review of investigation files. When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Where sexual abuse is alleged, the agency uses investigators who have received special training in sexual abuse investigations pursuant to 115.34.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, the agency conducts compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Administrative investigations includes an effort to determine whether staff actions or failures to act contributed to the abuse; and is documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Substantiated allegations of conduct that appears to be criminal are referred for prosecution.

The agency retains all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The departure of the alleged abuser or victim from the employment or control of NENMDF or agency shall not provide a basis for terminating an investigation.

**Standard  
number here**

115.72 Evidentiary standard for administrative investigation

- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. E. III B 2 (d); NENM 12.000 pg. 26 O. 2. Based on interview with investigative staff. Review of investigation files. The agency imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

<b>Standard number here</b>	115.73 Reporting to inmates
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2.E III F (a-c); NENM 12.000 pg. 24 4.(b-d); Based on interview with warden; investigative staff; inmate who reported sexual assault. Reviewed Notification of Outcome of Investigation. Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, the agency informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

- (1) The staff member is no longer posted within the inmate’s unit;
- (2) The staff member is no longer employed at NENMDF;
- (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within NENMDF; or
- (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within NENMDF.

Following an inmate’s allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:

- (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within NENMDF; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within NENMDF.

All such notifications or attempted notifications are documented.

An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

<b>Standard number here</b> 115.76 Disciplinary sanctions for staff
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. E. III 3 G 1.(a,c,d); NENM 12.000 N.1. (a,c) Employee Handbook pg. 16. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.

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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

<b>Standard number here</b> 115.77 Corrective action for contractors and volunteers
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III G 3 (a); 5.1.2. E. III G 3 (a-f) ; NENM 12.000 pg. 13 & 14 H. 3. (a-b) & G. 3. (a). Based on interview with warden. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be

reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

NENMDF takes appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Reviewed several investigations involving a contracted doctor resulting in termination. Cases are still being investigated. Memo to staff refusing Dr. access to facility.

<b>Standard number here</b> 115.78 Disciplinary sanctions for inmates
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- Exceeds Standard (substantially exceeds requirement of standard)
- X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. E. III G 2 (a-f); NENM 12.000 pg. 25 N. 2. (a-f); Based on interview with medical/mental health staff. Reviewed Inmate Handbook pg. 34&35. Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Sanctions are 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.

The disciplinary process considers whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

The agency disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

The agency prohibits all sexual activity between inmates and may discipline inmates for such activity.

<b>Standard number here</b> 115.81 Medical and Mental health screening; history of sexual abuse
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- Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III D 2 (a-d); NENM 12.000 pg. 9 2 (b-e ) Based on interview with staff responsible for risk screening and medical/mental health staff. Reviewed Sexual Risk Indicator Screening; PREA Mental Health Referral; Mental Health Progress Notes. All new arrivals see a Mental Health provider. If the screening indicates that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

If the screening indicates that a prison inmate has previously perpetrated sexual abuse/prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensures that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Medical and mental health practitioners shall 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.

**Standard number here**

115.82 Access to emergency medical and mental health services

Exceeds Standard (substantially exceeds requirement of standard)

X. Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on 5.1.2. A. III L 7 (a-b); NENM 12.000 pg. 21 7 (a-b) Based on interview with medical and mental health staff and inmates who reported sexual abuse. MOU between NENM and Tri County Community Services Inc. and MOU between NENM & Christus St. Vincent Regional Medical Center, Sante Fe NM. 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.

If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders takes preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.

Inmate victims of sexual abuse while incarcerated are 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.

Treatment services are 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.

**Standard number here**

115.83 ongoing medical and mental health care for sexual abuse victims

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. III M 1 (a-d); NENM 12.000 pg. 23 M. 1. (a-d) Based on interview with medical/mental health staff and inmates who reported sexual assault. NENMDF offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in the facility.

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.

NENMDF provides such victims with medical and mental health services consistent with the community level of care.

Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Treatment services are 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.

**Standard number here**

115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. M. 3 (a-c); NENM 12.000 pg. 24 3 (a-c) Based on interview with warden, PREA compliance manager; incident review team.

NENMDF conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. This review ordinarily occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at NENMDF; and they examine the area in NENMDF where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Reviewed After Action Report. Excellent PREA after action review form that addresses all elements of the standard. NENMDF conducts an IRT for all cases Substantiated, Unsubstantial and Unfounded cases. It was suggested to include other staff on an ad hoc basis if the incident occurred in other areas such as kitchen, maintenance, programs etc.

<b>Standard number here</b>	115.87 Data collection
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. N. 1. (a-d), N. 3. (c ); NENM 12.000 pg. 26 P. 1 (a-d) Reviewed annual report for 2012 & 2013 on the NMDOC website., also reviewed monthly PREA incident tracking log form; DoJ Survey of Sexual Violence 2012; OIG Annual Report 1.31.14. The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

The agency aggregate the incident-based sexual abuse data at least annually.

The incident-based data collected shall 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.

The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

<b>Standard number here</b> 115.88 Data review for corrective action
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III. N 2.(a-d). Based on interview with PREA coordinator.

The agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

Such report includes a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. The agency's report is approved by the agency head and made readily available to the public through its website. Reviewed annual report 2012 & 2013 also viewed report on the NMDOC website <http://corrections.state.nm.us/oig.html>

The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

<b>Standard number here</b> 115.89 Data storage, publication and destruction
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on policy 5.1.2. A. III N. 3 the agency ensures that data collected pursuant to § 115.87 are securely retained.

The agency makes 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. Reviewed report on the NMDOC website. <http://corrections.state.nm.us/oig.html> Reviewed DoJ Survey of Sexual Violence 2012 and NMCD Annual Assessment Regarding Sexual Abuse.

Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

The agency maintains 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.

**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

\_\_Katherine Brown\_\_\_\_\_

\_May 28, 2014\_\_\_\_\_

Auditor Signature

Date