PREA Facility Audit Report: Final

Name of Facility: Central Arizona Correctional Facility
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 06/28/2024

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: Patrick Firman	**Date of Signature:** 06/28/2024

AUDITOR INFORMATION	
Auditor name:	Firman, Patrick
Email:	patrickfirman@gmail.com
Start Date of On-Site Audit:	05/13/2024
End Date of On-Site Audit:	05/15/2024

FACILITY INFORMATION	
Facility name:	Central Arizona Correctional Facility
Facility physical address:	1401 East Diversion Dam Road, Florence, Arizona - 85132
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Warden/Jail Administrator/Sheriff/Director	
Name:	Edward Coday
Email Address:	ecoday@geofroup.com
Telephone Number:	928 715-1824

Facility PREA Compliance Manager	
Name:	David Dowling
Email Address:	ddowling@geogroup.com
Telephone Number:	O: (520) 868-4809
Name:	Raynette Willey
Email Address:	rwilley@geogroup.com
Telephone Number:	O: (520) 868-4809

Facility Health Service Administrator On-site	
Name:	Lindsey Warden
Email Address:	LinsdayWarden@geogroup.com
Telephone Number:	520 667-4238

Facility Characteristics	
Designed facility capacity:	1280
Current population of facility:	1266
Average daily population for the past 12 months:	1256

Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	20-60
Facility security levels/inmate custody levels:	Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	209
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	22
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	22

AGENCY INFORMATION	
Name of agency:	The GEO Group, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	4955 Technology Way, Boca Raton, Florida - 33431
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	Jose Gordo
Email Address:	jgordo@geogroup.com
Telephone Number:	5618930101

Agency-Wide PREA Coordinator Information			
Name:	Manuel Alvarez	**Email Address:**	Manuel.Alvarez@geogroup.com

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-05-13
2. End date of the onsite portion of the audit:	2024-05-15

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The facility currently uses RAINN (Rape, Abuse & Incest National Network) to provide advocacy services to inmates. Information regarding RAINN is available through the inmate's case worker and also through the handbooks provided to inmates. RAINN was contacted and described the services available to inmates and how local services are provided based on the area code of the caller. The facility has documented numerous ongoing attempts to establish an MOU with local victim advocates.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1280
15. Average daily population for the past 12 months:	1264
16. Number of inmate/resident/detainee housing units:	21

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	○ Yes ◉ No ○ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	1266
38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	11
40. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

42. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	166
43. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	77
44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	10
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	126
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	257
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	28
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	34

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☑ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☑ Length of time in the facility ☑ Housing assignment ☐ Gender ☐ Other ☐ None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmate interviews were randomly selected from a roster provided by the facility based on time in the facility, housing unit and race.
56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16

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".

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Facilty stated that there were no inmates meeting this criteria at the faciity at the time of the onsite.
64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Facilty stated that there were no inmates meeting this criteria at the faciity at the time of the onsite.
68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	6
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Facilty stated that there were no inmates meeting this criteria at the faciity at the time of the onsite.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	16
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
76. Were you able to interview the Agency Head?	(●) Yes ( ) No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
78. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
79. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	☑ Agency contract administrator ☑ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment ☐ Line staff who supervise youthful inmates (if applicable) ☐ Education and program staff who work with youthful inmates (if applicable) ☑ Medical staff ☐ Mental health staff ☐ Non-medical staff involved in cross-gender strip or visual searches ☑ Administrative (human resources) staff ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff ☑ Investigative staff responsible for conducting administrative investigations ☐ Investigative staff responsible for conducting criminal investigations ☑ Staff who perform screening for risk of victimization and abusiveness ☑ Staff who supervise inmates in segregated housing/residents in isolation ☑ Staff on the sexual abuse incident review team ☑ Designated staff member charged with monitoring retaliation ☑ First responders, both security and non-security staff ☑ Intake staff

	☑ Other
If "Other," provide additional specialized staff roles interviewed:	Kitchen Supervisor Maintenance Supervisor
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	○ Yes ◉ No
82. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☑ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	During the site review, I observed audit notices prominently displayed in English and Spanish throughout the facility. Signs were dated and signed off by the Warden as indicated in the date-stamped photos previously submitted. Informal conversations with staff and inmates confirmed the placement of audit notices. Central Arizona Correctional Facility is an all-male institution, and no female inmates are housed. Female staff members were observed announcing their presence when entering male living areas. Each housing unit had a central bathroom area. Toilets were separated by a half wall. Shower stalls allowed inmates to change clothing without being seen by non-medical staff of the opposite gender. Four housing units had showers equipped with shower curtains to provide privacy for transgender inmates from both staff and other inmates. Cameras were observed throughout the facility, along with mirrors to supplement. Areas where inmates were not allowed to be in were covered by cameras to show anyone entering or leaving the area. Camera monitoring was observed in the control area to ensure that coverage did not reveal areas where inmates may be unclothed. Since the last PREA audit, the facility reported that cameras or electronic surveillance systems have not been added or upgraded. Record storage areas were observed to be secured. PREA-related records are stored inside locked cabinets in the PREA Manager's office. Computer access to records is based on a staff member's work assignment and the need to access documents. The facility IT manager was interviewed and described the processes in place to ensure computer security is maintained. An electronic key system is used at the facility to control who is given access to administrative areas.

	A central mailbox is available for outgoing mail, as well as internal letters to facility staff. Privileged outgoing mail is not opened or screened. Outgoing mail does not require a return address to be mailed. Approximately 10% of all non-privileged outgoing mail is spot checked. A risk screening was observed on the first day of the onsite visit. The risk screening form was observed to include all required information. Risk screening staff asked about prior victimization, sex offenses, and sexually violent convictions. Incoming inmates were asked how they identified, and staff indicated personal observations on the risk screening form. As part of the initial risk screening, inmates are required to watch and acknowledge in writing the viewing of the National PREA informational video. This was available in both English and Spanish. Inmates receive additional PREA information at an orientation held weekly for new arrivals. A language line was observed and available for staff to use when necessary. The facility language line was used to interview an inmate who was LEP. PREA posters and information were observed in all areas accessible to inmates and staff in both English and Spanish. PREA posters were also observed in areas visible to visitors coming to the facility. Signage outlining different reporting options are posted in each unit above the inmate telephones. When the inmate picks up the phone receiver an automated recording plays a PREA recording in English and Spanish, allowing the inmate to privately contact a PREA representative without entering an identifying PIN. Third-Party Reporting posters and Sexual Assault Awareness brochures were posted throughout the facility. The hotline phone number for reporting PREA was tested. Prior to the end of the tour, the PREA Manager received a notification that auditor’s test message was

	received. Security staff fall under a collective bargaining agreement that was reviewed to ensure it did not restrict the facility from reassigning staff as a result of a sexual harassment or sexual abuse investigation. During the site tour, I was given unfettered access to all areas of the facility.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Twenty-four inmate records were randomly selected and reviewed to determine compliance with screening requirements. All inmates are screened within 24 hours of arrival at the facility and followed up, when necessary, within 30 days. Inmates determined to be at risk of victimization or being abusers are referred for evaluations. Inmates must sign to accept or decline the service. Random medical files for inmates who accepted followup evaluations were examined and found to include proper documentation regarding the followup. All inmate records reviewed contained appropriate acknowledgment for receiving PREA educational materials. Seven randomly selected volunteer records were reviewed. All records contained a current background clearance as well as signed acknowledgement that PREA training was completed, and the facility's zero tolerance policy was understood. The facility maintains training records electronically. Training files were examined and revealed that staff completed the required PREA training. Fourteen staff records were randomly selected and reviewed. All files examined contained initial background clearances completed by Accurate Background. Documentation for staff transferring from other facilities included attempts to communicate with the previous facility. Self-disclosure statements are renewed and signed annually as part of a performance evaluation. Records of four staff members who had been promoted in the past 12 months were examined, and all had backgrounds completed before the promotion. Records of 27 staff members with the agency for five years were examined and found to contain the appropriate background clearance renewals conducted and signed off by the Arizona Department of Corrections (Client).

	The facility conducted retaliation monitoring for four inmates in the past 12 months. All retaliation monitoring records were examined and found to be complete and accurate.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	3	0	3	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	3	0	3	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	1	0	1	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	1	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	2	1	0

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	3

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes ( ) No (●) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	◉ Yes ○ No ○ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
112. 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)
113. 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)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	During the previous 12 months, there were four allegations of sexual abuse/sexual harassment that resulted in administrative investigations being completed by the Arizona Department of Corrections CIU. One allegation was inmate-on-inmate sexual abuse that was administratively investigated and determined to to be unsubstantiated. At the close of the investigation, the inmates involved had been moved to other facilities and the CIU was responsible for making notification of the findings. Two allegations were inmate-on-inmate sexual abuse that were both investigated and closed as unfounded. There was one allegations of staff-on-inmate sexual harassment that was administratively investigated and determined to be unfounded.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	◉ The audited facility or its parent agency ○ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ○ A third-party auditing entity (e.g., accreditation body, consulting firm) ○ Other

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2 Zero Tolerance Policy Toward Sexual Abuse and Harassment (effective 2/5/2024)** • **GEO Corporate Policy and Procedure Manual 5.1.2-C Sexually Abusive Abusive Behavior Prevention and Intervention Program for Lockup Facilities (effective 1/4/2024)** • **Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 125 – Sexual Offense Reporting (effective 12/24/20)** • **CACF Organizational Chart** • **Interview responses from the PREA Coordinator**

- **Interview responses from the facility PREA Manager**

Reasoning and analysis (by provision):

115.11(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a written policy mandating zero tolerance.
    2. Reported that the agency has a written policy outlining the agency's approach to preventing, detecting, and responding to such conduct.
    3. Reported that the policy includes definitions of prohibited behaviors.
    4. Reported that the policy includes sanctions for those found to have participated in prohibited behaviors.
    5. Reported that the policy includes a description of the agency's strategies and responses to reduce and prevent SA and SH of inmates.
3. GEO Corporate Policy and Procedure Manual 5.1.2 Zero Tolerance Policy Toward Sexual Abuse and Harassment (pp. 1-7):
    1. Outlines the agency's policy mandating zero tolerance towards all forms of SA and SH and outlining GEO's approach to preventing, detecting, and responding to such conduct.
    2. Includes definitions of prohibited behaviors.
    3. Includes sanctions for those found to have participated in prohibited behavior.
4. GEO Corporate Policy and Procedure Manual 5.1.2-C Sexually Abusive Abusive Behavior Prevention and Intervention Program for Lockup Facilities:
    1. Outlines strategies and responses to reduce and prevent SA and SH.
5. ADOC Department Order 125 (section 1.2.3 and attachments A-E):
    1. Outlines the department's zero tolerance towards SA and SH.
    2. Outlines the department's approach to preventing, detecting, and responding to such behaviors.
    3. Outlines that disciplinary action, including possible criminal prosecution, may be taken.
    4. Describes the department's strategies and responses to reduce and prevent SA and SH.

115.11(b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency employs an upper-level, agency-wide PREA Coordinator.
    2. Reported that the PREA Coordinator has sufficient time and authority

	to develop, implement, and oversee the agency efforts to comply with the PREA standards. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A (p 3): 1. Outlines the designation and responsibilities of an agency-wide PREA Coordinator. 2. Outlines the designation and responsibilities of a facility-level PREA Manager. 3. GEO Corporate Organizational Chart: 1. Outlines the PREA Coordinator and PREA Manager positions within the organization. 4. Central Arizona Organizational Chart: 1. Outlines the position of PREA Compliance Manager as the Chief of Security reporting to the Facility Director. **What was heard as part of a systematic review of evidence:** 1. Interview with the PREA Coordinator: 1. PREA Coordinator reported that he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with PREA standards in all community confinement facilities. 2. Interview with the PREA Manager: 1. PREA Manager stated that he had sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. 2. PREA Manager stated that he reports to the Facility Administrator. **Based on this analysis, the facility complies with this provision, and corrective action is not required.**

115.12	**Contracting with other entities for the confinement of inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 **Evidence relied upon in making the compliance determination:** • Interview with the Agency Contract Administrator, confirmed that the agency has not entered into or renewed a contract for the confinement of residents since the last PREA audit. **Based on this analysis, the facility substantially complies with this provision, and corrective action is not required.**

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.13
	
	Evidence relied upon in making the compliance determinations:
	
	• **Central Arizona Correctional Facility (CACF) PAQ**
	• **GEO Corporate Policy and Procedure Manual 5.1.2-A PREA Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
	• **Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 703 – Security/Facility Inspections (effective 11/25/23)**
	• **CACF Approved Staffing Plan**
	• **Annual PREA Facility Assessment report**
	• **Interview with Facility Director**
	• **Interview with PREA Manager**
	• **Documentation from shift logs outlining unannounced rounds**
	• **Site review observations**
	
	Reasoning and analysis (by provision):
	
	115.13(a)
	
	What was read as part of a systematic review of evidence:
	
	1. The facility PAQ:
	  1. Reported that the facility develops and documents a staffing plan that provides for adequate levels of staffing.
	  2. Reported that the average daily number of inmates since the last PREA audit was 1258.
	  3. Reported that since the last PREA audit, the staffing plan was developed based on 1258 inmates..
	2. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 3):
	  1. Outlines that each facility must develop and document a staffing plan that provides adequate levels of staffing and, where applicable, video monitoring to protect individuals against SA.
	
	What was heard as part of a systematic review of evidence:
	
	1. Interview with PREA Manager:
	  1. PREA Coordinator reported that a staffing plan has been developed for the facility that provides adequate staffing levels and video monitoring. The plan is reviewed each year.

2. Interview with Facility Director:
    1. Confirmed that a staffing plan is in place that is reviewed each year. The staffing plan takes into account the number of inmates, as well as the availability of cameras and mirrors throughout the facility.
    2. Stated that the staffing at the facility exceeds the number of staff required by contract with the Arizona Department of Corrections.

What was observed as part of a systematic review of evidence:

1. Annual review of facility staffing plan.
    1. Takes into consideration all provisions outlined in this standard.
2. Site review observations:
    1. Observation of adequate staffing over several shifts.
        1. There did not appear to be a shortage of staff or any overcrowding in the housing areas.
    2. Observation of camera and mirror placement to cover all blind spots and entrance/exits to areas where inmates were not allowed.
        1. Video observation posts were examined to determine the extent of video monitoring and that camera angles did not show inmates in states of undress.
    3. Informal conversations with staff regarding staffing levels.
        1. Staff confirmed that they are required to fill positions based on their contract with ADOC.
    4. Informal conversations with inmates regarding staffing and program participation:
        1. Inmates did not complain about not being able to participate in programming or recreational opportunities due to a lack of staffing.

115.13(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that there have been no instances where the staffing plan has not been complied with.
    2. Reported that if the staffing plan were deviated from, it would be documented and reasons justified.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A PREA Sexually Abusive Behavior and Intervention Procedure (p. 3):
    1. Requires the Facility Director document and justify any deviations from the staffing plan.

What was heard as part of a systematic review of evidence:

1. Interview with Facility Director:

1. Reported that he is required to document and report any deviations from the staffing plan.

115.13(c)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 3):
    1. Requires that each facility assess, determine and document no less frequently than once each year whether adjustments are needed to the staffing plan, deployment of video technology or other resources.

What was heard, as a part of a systematic review of evidence:

1. Interview with Facility Director:
    1. Reported that he reviews the staffing plan yearly in conjunction with corporate leadership to determine if any adjustments need to be made with staffing levels, additional monitoring technology or allocation of facility resources are needed to ensure compliance with the staffing plan.
2. Review of annual staffing plan:
    1. Revealed that consideration was given to adequate level of staffing.
    2. Revealed that consideration was given to any need for additional cameras or mirrors.
    3. Revealed that consideration was given to previous reports of sexual abuse/sexual harassment.

115.13(d)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 4):
    1. Outlines that facilities shall implement a policy and practice requiring higher-level supervisor (facility management staff) and intermediate-level supervisors (shift supervisors or assistant shift supervisors) to conduct and document unannounced PREA rounds in all areas and on all shifts to identify and deter employee sexual abuse and sexual harassment. Such policy and practice shall be implemented no less than once per week for U.S Secure Services on all shifts.
    2. Outlines that employees are prohibited from alerting other employees that these supervisory rounds are occurring unless such an announcement is related to the facility's legitimate operational functions.
2. Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 703 – Security/Facility Inspections (pp. 2-3):
    1. Requires that Wardens, Deputy Wardens, Associate Deputy Wardens,

	Majors, Captains, CO IVs, and supervisory staff shall conduct inspections of their areas of responsibility. 2. Inspections shall not be restricted to certain hours or routines; they shall be unscheduled and unannounced. Staff members are prohibited from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational· functions of the facility. 3. Sample documentation from log books revealed unannounced rounds being made on each shift buy the Chief of Security. **What was heard as part of a systematic review of evidence:** 1. Interview with the PREA Manager: 1. PREA Manager (Chief of Security) stated that he is required to make regular announced rounds throughout the entire facility. **Based on this analysis, the facility is substantially compliant with this provision, and corrective action is not required.**

115.14	**Youthful inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 **Evidence relied upon in making the compliance determinations:** • Central Arizona Correctional Facility PAQ • Interview with PREA Manager **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the facility does not house youthful inmates. 2. Interview with PREA Manager: 1. PREA Manager confirmed that the facility does not house youthful inmates. **Based on this analysis, the facility is substantially compliant with this provision, and corrective action is not required.**

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

	115.15
	
	Evidence relied upon in making the compliance determinations:
	
	• **Central Arizona Correctional Facility (CACF) PAQ**
	• **GEO Corporate Policy and Procedure Manual 5.1.2-A (effective 1/4/2024)**
	• **Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 708 – Searches (effective 11/27/23)**
	• **Interview responses from random staff**
	• **Site review observations**
	
	Reasoning and analysis (by provision):
	
	115.215(a)
	
	What was read as part of a systematic review of evidence:
	
	1. The facility PAQ:
	  1. Reported that the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates.
	  2. Reported that there has been zero cross-gender strip or cross-gender visual body cavity searches of inmates in the past twelve months.
	2. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 12):
	  1. Outlines that cross-gender strip searches are prohibited except in exigent circumstances.
	  2. Outlines that cross-gender visual body cavity searches (meaning a search of the anal or genital opening) are prohibited except in exigent circumstances and shall only be performed by offsite Medical Practitioners.
	3. Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 708 – Searches (p. 8)
	  1. Outlines that strip searches shall be performed by a staff member of the same gender and performed in areas designated by the Warden, Deputy Warden or Administrator.
	
	What was observed, as part of a systematic review of evidence:
	
	1. Site review observations:
	  1. Informal conversations with staff and inmates confirmed that cross-gender strip search and body cavity searches are not performed at the

facility.

115.15(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility does not house female inmates.

115.15(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility requires that all cross-gender strip and visual body cavity searches are documented.
    2. Reported that the facility does not house female inmates.

115.15(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility has implemented policy and procedures that enable inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia except in exigent circumstances or when viewing is incidental to routine cell checks.
    2. Reported that policy and procedures require staff of the opposite gender to announce their presence when entering an area where inmates are likely to be showering, performing bodily functions or changing clothes.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 12):
    1. Outlines that each facility shall implement policies and procedures which allow individuals in a GEO facility to shower, change clothes, and perform bodily functions without employees of the opposite gender view them, absent exigent circumstances, or in stances when the view s incidental to routine cell checks.
    2. Policy and procedures shall require employees of the opposite gender to announce their presence when entering housing units or any areas where individuals are likely to be showering, performing bodily functions, or hanging clothes.

What was heard as part of a systematic review of evidence:

1. Interviews with random inmates:

1. Inmates interviewed stated that staff of the opposite gender consistently announce their presence when entering an area where they may be showering, using the toilet, or changing their clothes.
2. Inmates interviewed stated that there has not been an instance where staff of the opposite gender has seen a inmate in an unclothed state.

2. Interviews with random staff:
    1. Female staff interviewed stated that they always announce themselves when entering an area where inmates of the opposite gender are living.
    2. Staff interviewed stated that inmates are able to dress, shower and toilet without being viewed by staff of the opposite gender.

What was observed as part of a systematic review of evidence:

1. Site review:
    1. Bathroom areas provide showers with side walls to provide privacy from staff walking past the bathroom.
    2. Toilet areas are provided with half walls to provide privacy while using the toilet.
    3. Mirrors and camera placement do not provide views into areas where inmates shower, toilet or change clothes.
    4. Cameras are fixed (non-pan/tilt/zoom) and cannot be manipulated to show different angles. Video viewing areas were observed to confirm this.
    5. Informal conversations with inmates and staff indicated that staff consistently announce their presence to include loud verbal announcements. Female staff reported that they do not enter the bathroom areas while inmates are in there.

115.15(e)

What was read as part of a systematic review of evidence:

1. Facility PAQ:
    1. Reported that there is a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining genital status.
    2. Reported that zero searches as described above have occurred in the past 12-months.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A (pp. 12-13):
    1. Outlines that the facility shall 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 may be determined during conversations with the inmate, by reviewing medical records, by consulting the referring agency, and/or, if necessary, by learning that information as part of a broader medical

examination conducted in private by a medical practitioner.

What was heard as part of a systematic review of evidence:

1. Interviews with random staff:
    1. Staff interviewed reported that they were aware of policy prohibiting the searching or physically examining of transgender or intersex inmates for the sole purpose of determining genital status.
2. Interviews with transgender inmates:
    1. Transgender inmates interviewed stated that they do not believe they were strip-searched for the sole purpose of determining their genital status.

115.15(f)

What was read as part of a systematic review of evidence:

1. Facility PAQ:
    1. Reported that all staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner.

What was heard as a part of a systematic review of evidence:

1. Interviews with random staff:
    1. All staff interviewed stated that they had received training in conducting cross-gender pat-down searches as well as searching transgender and intersex inmates in a professional and respectful manner.
    2. Staff interviewed stated that they do not perform any cross-gender pat-down searches.

What was observed as part of a systematic review of evidence:

1. Staff training files:
    1. A random sampling of training files revealed that all staff had received and acknowledged training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner.

Based on this analysis the facility is substantially compliant with this provision, and corrective action is not required.

115.16	Inmates with disabilities and inmates who are limited English

	proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.16
	
	Evidence relied upon in making the compliance determinations:
	
	• **Central Arizona Correctional Facility (CACF) PAQ**
	• **GEO Corporate Policy and Procedure Manual 5.1.2-A - Oversight (effective 1/4/2024)**
	• **Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 704 – Inmate Regulations (effective 12/1/23)**
	• **PREA Inmate Education Manual (English/Spanish)**
	• **CACF inmate reporting options posters (English/Spanish)**
	• **Interview with agency head**
	• **Interviews with random staff**
	• **Interviews with inmates with disabilities or who are Limited English Proficient**
	• **Site review observations**
	
	Reasoning and analysis (by provision):
	
	115.16(a/b)
	
	What was read as part of a systematic review of evidence:
	
	1. The facility PAQ:
	    1. Reported that the agency has established procedure to provide disabled inmate equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to SA and SH.
	    2. Reported that the agency has established procedures to provide inmates with limited English proficiency 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.
	2. GEO Corporate Policy and Procedure Manual 5.1.2-A (p. 8):
	    1. Requires that facilities ensure that individuals with disabilities have an equal opportunity to participate in or benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
	    2. Requires that facilities provide written materials to every inmate in formats or through methods that ensure effective communication with individuals with disabilities, including those who have intellectual disabilities, limited reading skills or who are blind or have low vision.

3. Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 704 – Inmate Regulations (p. 21):
    1. Outlines that applicable rules, regulations and Department Orders shall be read aloud during initial orientation for those inmates who are visually impaired or have a language or literacy problem. Orientation staff shall ensure inmates understand the orientation materials.
    2. Hearing impaired inmates shall receive a translation of orientation materials in sign language, or through another approved relay service.
    3. Orientations shall be documented on the appropriate ACIS screen.

What was heard as a part of a systematic review of evidence:

1. Interview with Agency Head:
    1. Stated that all of GEO's facilities have developed PREA education materials in various formats to ensure that those individuals with disabilities and those who are limited English proficient can equally benefit from the PREA program. We have developed posters, pamphlets, videos, large print materials, etc. as well as provide TTY phones, access to language lines and designated staff interpreters to ensure we can effectively communicate the PREA procedures and available services to the individuals we house. Facilities are prohibited from relying on inmates to do this for us. GEO also reaches out to community-based resources (i.e. local colleges or organizations) that might be willing to assist us.
2. Interview with inmate who was limited English proficient:
    1. Facility language line was used to provide interpretation services for interview.
    2. Inmate stated that he did not receive any orientation materials at all. A review of inmate's file revealed that he had received orientation material in Spanish and signed off acknowledging this on a form written in Spanish.
3. Interview with inmate who was visually impaired:
    1. Inmate stated that he had no concerns with the material that was provided to him when arriving at the facility as it relates to reporting sexual harassment or sexual abuse.

What was observed as a part of a systematic review of evidence:

1. Site review observations:
    1. Language line instructions were available in multiple areas for staff to use for translation services in the privacy of staff offices.
    2. The facility designates staff members as official interpreters.
    3. Signage throughout the facility was observed to be posted in both English and Spanish.
    4. Orientation material was observed in the intake area in both English and Spanish.

5. Testing of the telephone system revealed an option when the receiver was picked up to use English or Spanish. A PIN was not required to make a phone call.

115.16(c)

What was read as a part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency prohibits the use of inmate interpreters except in limited circumstances where an extended delay could compromise the inmate’s safety, the performance of first responder duties or the investigation of the inmate's allegations.
    2. Reported that in the past 12 months there were zero instances where inmates were used to interpret.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A - Oversight (effective 1/4/2024)
    1. Outlines that offenders may not be relied on as readers or other types of assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the individual's safety, the performance of first-responder's duties in an emergency, or the investigation of the individual's allegations.
    2. The use of individuals in a GEO program as interpreters shall be justified and fully documented in the written investigative report under these types of circumstances.
3. Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 704 – Inmate Regulations (pp. 21-22):
    1. Requires that Wardens and Deputy Wardens provide interpreters for inmates in need of such services, which may include interpreters for language, literacy, the deaf, and the blind.
    2. Recruit and provide interpreters in the following order:
        1. Utilize the electronic language line for all healthcare or mental health related contacts.
        2. A staff member within the same prison or facility.
        3. A staff member in another institution, facility or bureau within the Department.
        4. A volunteer interpreter from a community service agency.
    3. Maintain, by language, a list of staff and volunteers available as interpreters for their institutions
    4. Ensure interpreters are provided for inmates for Due Process proceedings, as necessary.

What was heard as a part of a systematic review of evidence:

1. Interview with random staff:
    1. Staff interviewed stated that it was against policy to other inmates to

	interpret. 2. Staff interviewed stated that there was a language line available when interpretation services were needed and a list of staff members who were bilingual were not present. 2. Interview with LEP inmate: 1. Inmate reported that staff use a language line to communicate with him, or they will use another staff member who speaks Spanish. **Based on this analysis the facility is substantially compliant with this provision, and corrective action is not required.**

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.17 **Evidence relied upon in making the compliance determination:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A - Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 125 – Sexual Offense Reporting (effective 12/24/20)** • **Review of staff personnel files** • **Interview with administrative staff** **Reasoning and analysis (by provision):** **115.17(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. 2. 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.
3. Has been civilly or administratively adjudicated to have engaged in the activity described above.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Procedure (p. 8):
    1. Outlines that GEO Facilities are prohibited from hiring or promoting anyone (who may have contact with inmates who has engaged in, been convicted of, or been civilly or administratively adjudicated for engaging in Sexual Abuse in confinement settings or the community.

What was observed as part of a systematic review of evidence:

1. Review of random employee files:
    1. Revealed that staff hired or promoted in the past 12 months had criminal record background checks conducted.
    2. Applications require applicant to self disclose any type of prohibited activity.

115.17(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency policy requires the consideration of 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.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Procedure (p. 4):
    1. Facilities shall consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with Individuals in a GEO facility or program.

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Confirmed that incidents of sexual harassment are considered for everyone in determining whether to hire, promote or enlist the services of anyone who may have contact with inmates.
    2. Questions regarding incidents of sexual harassment are included in the application questionaire.

115.17(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency policy requires that before it hires any new employee who may have contact with inmates, it conducts a criminal background record check, and makes its best efforts to contact all prior institutional employers for information on substantiated allegation of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.
    2. Reported that in the past 12 months there were 78 persons hired who may have contact with inmates who have hand criminal background record checks.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Procedure (p. 4):
    1. Each Facility shall conduct criminal background checks and make its best efforts to contact prior institutional employers to obtain information on substantiated allegations of Sexual Abuse or any resignation pending investigation of an allegation of sexual abuse, prior to hiring new employees.
3. Arizona Department of Corrections, Rehabilitation and Reentry (ADOC) – Department Order 125 – Sexual Offense Reporting (p. 15):
    1. Outlines that the Contract Beds Administrator shall ensure employees of the private prisons undergo required background checks conducted by the department's Background Investigation Unit.
    2. Outlines that another consideration for employment shall be whether the applicant has ever worked in a Department or other correctional facility, and if so, whether he/she were the subject of investigation(s) and/or allegation(s) of inappropriate staff-inmate relationships. (Including queries of Department databases and Human Services Bureau rehire information.)

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Confirmed that all new employees undergo a background check, both through GEO and through the Arizona Department Department of Corrections (Client).
    2. Confirmed that when an employee indicates that they have worked at another institution, part of the background that is completed includes requesting information from that facility regarding any substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

What was observed as part of a systematic review of evidence:

1. Review of random employee files:
    1. Revealed that applicants are asked about employment at other institutions.

2. Revealed that information is requested from other institutions as part of the background investigation.

115.17(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency policy requires that a criminal background check be completed before enlisting the services of any contractor who may have contact with inmates.
    2. Reported that the number of contracts for services in the past 12 months where criminal backgrounds checks were completed was 78.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Procedure (pp. 11-12):
    1. Each Facility shall conduct criminal background checks and make its best efforts to contact prior institutional employers to obtain information on substantiated allegations of sexual abuse or any resignation pending investigation of an allegation of sexual abuse, prior to enlisting the services of any Contractor. Background checks shall be repeated for all Contractors at least every five years.
3. Review of contractor records confirmed tht backround checks are completed.

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Confirmed that background checks are completed through a contracted agency.

115.17(e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency policy requires that a criminal background check be conducted at least every five years for current employees and contractors who may have contact with inmates.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Plan (pp. 4, 12):
    1. Background checks shall be repeated for all Employees at least every five years.
    2. Background checks shall be repeated for all Contractors at least every five years.

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Confirmed that background checks are completed through a contracted agency.
    2. Confirmed that background checks are completed at least every five years, or when an employee is promoted.

What was observed as part of a systematic review of evidence:

1. Review of random employee files:
    1. Revealed that background checks are completed every five years.
    2. Revealed that staff who are up for promotion have a background completed regardless of the time since the previous check.

115.17(f/g)

What was read as part of a systematic review of evidence:

1. Facility PAQ:
    1. Reports that agency policy states that material omissions regarding such misconduct, or the provision of materially false information shall be grounds for termination.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A – Sexually Abusive Behavior and Intervention Procedure (p. 4):
    1. Outlines that GEO shall ask all applicants and employees who may have contact with individuals in a GEO facility directly about previous sexual misconduct as part of the hiring and promotional processes and during annual performance reviews for current employees.
    2. Outlines that employees are required to provide a continuing affirmative duty to disclose any such conduct and/or allegations to the Facility Administrator.
    3. Outlines that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Confirmed that staff are required to sign a disclosure form prior to hire and again as part of their yearly performance appraisal.
    2. Confirmed that staff are required to affirmatively disclose any misconduct.

115.17(h)

What was heard as part of a systematic review of evidence:

1. Interview with administrative staff:
    1. Stated that the corporate office will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving request.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

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

115.18(a/b)

Evidence relied upon in making the compliance determination:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **Interview with Facility Director**

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility has not acquired a new facility or made a substantial expansion or modification to existing facilities, including installing or updating a video monitoring system since the last PREA audit.
    2. Reported that the facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the previous PREA audit.

What was heard as a part of a systematic review of evidence:

1. Interview with the Facility Director:
    1. Confirmed that the facility has not acquired a new facility or made a substantial expansion or modification to existing facilities, including installing or updating a video monitoring system since the last PREA audit.

Based on this analysis the facility is substantially compliant with this provision, and corrective action is not required.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.21
	
	Evidence relied upon in making the compliance determination:
	
	• Central Arizona Correctional Facility (CACF) PAQ
	• GEO Corporate Policy and Procedure Manual 5.1.2-E - Sexually Abusive Behavior and Intervention Procedure (effective 12/17/2020)
	• Arizona Department of Corrections Department Order 608-Criminal Investigations (effective 10/11/2023)
	• Documentation of efforts to obtain an MOU with local rape crisis center
	• Statement of fact regarding victim advocate support
	• Interview responses from PREA Coordinator
	• Interview responses from facility investigator
	• Interviews with random staff
	
	Reasoning and analysis (by provision):
	
	115.21(a)
	
	What was read as part of a systematic review of evidence:
	
	1. The facility PAQ:
	    1. Reported that both the agency and the Arizona Department of Corrections (client) are responsible for conducting administrative sexual abuse investigations.
	    2. Reported that the facility is not responsible for conducting criminal sexual abuse investigations.
	    3. Reported that the Arizona Department of Corrections (Client) is responsible for all criminal sexual abuse investigations.
	    4. Reported that when conducting sexual abuse investigations, the agency investigators follow a uniform evidence protocol.
	2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (p. 5)
	    1. Facilities that are responsible for investigating allegations of Sexual Abuse are required to follow uniform evidence protocols that maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol shall be developmentally appropriate for youth where applicable, and as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly

comprehensive and authoritative protocols developed after 2011.

What was heard as part of a systematic review of evidence:

1. Interviews with random sample of staff:
    1. Staff interviewed understood the agency's protocols for preserving and maintaining physical evidence if a inmate alleges sexual abuse and gave examples of the steps they would take.

115.21(b)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-E - Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. The protocol shall be developmentally appropriate for youth where applicable, and as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

115.21(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility offers all inmates who experience sexual abuse access to forensic medical examinations.
    2. Reported that the facility offers all inmates who experience sexual abuse access to forensic medical examinations at an outside facility.
    3. Reported that forensic examinations are offered without financial cost to the victim.
    4. Reported that examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).
    5. Reported that when SANEs or SAFEs are not available, exams are performed at a local hospital.
    6. Reported the facility documents efforts to provide SANEs or SAFE's.
    7. Reported that there were zero forensic medical exams conducted during the past 12 months.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E - Sexually Abusive Behavior and Intervention Procedure (effective 2/14/2019) (p. 6):
    1. Outlines that facilities shall offer all individuals in a GEO facility who experience sexual abuse access to forensic medical examinations (whether on-site or at an outside facility) with the victim's consent and

without cost to the individual and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
    2. Facility medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Examinations shall be performed by a Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE). An offsite qualified medical practitioner may perform the examination if a SAFE or SANE is not available.
3. Arizona Department of Corrections Department Order 608-Criminal Investigations (p. 7):
    1. Provides that the use of outside forensic examination services (i.e., Sexual Assault Nurse Examiner (SANE), etc.) are authorized during the course of investigations involving sexual assaults.
    2. Provides tht costs incurred for outside forensic services are billed in accordance with A.R.S. §131414, Expense of Investigations. Any medical expenses arising out of the need to secure evidence that a person has been the victim of a dangerous crime against children as defined in A.R.S. §13-705 or a sexual offense pursuant to A.R.S. §131304, §13-1406 or §13-3212 shall be paid by the county in which the offense occurred.

115.21(d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility attempts to make available to the victim a victim advocate from a rape crisis center either in person or by other means.
    2. Reported that these efforts are documented.
    3. Reported that if and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.
    4. Reported that if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

What was heard as a part of a systematic review of evidence:

1. Interview responses from PREA Coordinator:
    1. Stated that GEO policy requires each facility to pursue a Memorandum

of Understanding (MOU) with a community-based provider capable of providing victim advocacy services. In the event a MOU cannot be obtained, the facility is required document the attempt to enter into a MOU and/or maintain documentation that no other alternatives are available in the community. If no alternatives are available, an agency staff member is screened for appropriateness to serve as an advocate and trained on the provision of victim advocacy services. Agency staff training is documented and maintained as part of the staff member's official training record.
        2. Stated that each facility ensures the rape crisis center provides the following: 24-hour hotline services; accompaniment and advocacy through medical, criminal just and support systems; crisis intervention services to include individual and group support services; information and referrals to assist the victim; community-based services; and the development/distribution of materials related to available services.
    2. The facility provided documentation regarding numerous attempts to establish an MOU with local rape crisis centers.
    3. The facility provides victim advocate services through the RAINN (Rape, Abuse and Incest National Network.
        1. Inmates are informed of this service through their case workers and through information provided in the inmate handbook.
    4. There were no inmates in the facility at the time of the onsite who had reported a sexual abuse.

115.21(f)

What was heard as part of a systematic review of evidence:

1. Interview responses from facility investigator:
    1. Stated that all criminal and administrative investigations of sexual abuse are conducted by the Arizona Department of Corrections Administrative Investigations Unit (AIU) and the Criminal Investigations Unit (CIU).

115.21(h)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-E - Sexually Abusive Behavior and Intervention Procedure (p. 6):
    1. Facility medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Examinations shall be performed by a Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE). An offsite qualified medical practitioner may perform the examination if a SAFE or SANE is not available.

	Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections (ADOC) Department Order 125 – Sexual Offense Reporting (effective 12/24/2020)** • **GEO Website (Investigations)** • **Review of investigative documentation** • **Interview responses from Agency Head** • **Interview with facility compliance administrator** **Reasoning and analysis (by provision):** **115.22(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. 2. Reported that in the past 12 months the number of allegations referred for criminal investigations were zero. 3. Reported that in the past 12 months, all administrative and/or criminal investigative investigations were completed. 2. A review of investigative documentation for allegations received during this reporting period revealed that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. **What was heard as part of a systematic review of evidence:** 1. Interview responses from Agency Head: 1. Reported that administrative or criminal investigations are required by

corporate and local facility policies. An investigation would be conducted by either the client investigative unit, local law enforcement (if criminal) or a trained GEO facility investigator (administrative only).
    2. Reported that GEO has designated staff at each facility that have received PREA Specialized Investigations training. GEO also utilizes local, state or federal agencies to investigate PREA allegations based on client contract requirements.
    3. Regardless of who does the investigation, all PREA allegations are documented and referred to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve criminal behavior.
2. Interview with facility compliance administrator:
    1. Reported that in the past 12 months there were a total of four allegations of sexual abuse/sexual harassment received from inmates and that investigations were completed on all four.

115.22(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations.
    2. Reported that the agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website.
    3. Reported that the agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention (p. 1):
    1. Outlines that each facility shall have a policy in place to ensure that all allegations of sexual abuse or sexual harassment are referred for investigation to a law enforcement agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Facilities shall document all referrals.
    2. Outlines that GEO shall publish its corporate investigations policy on its website.
3. Arizona Department of Corrections (ADOC) Department Order 125 – Sexual Offense Reporting (p. 11):
    1. Requires that Wardens request investigations as outlined in Department Order #608, Criminal Investigations, and provide written notification to the Assistant Director for Prison Operations through the Deputy Assistant Director for Prison Operations when an investigation involved a staff on inmate sexual assault allegation is opened. Once

	the criminal investigation is initiated, an administrative investigation shall be initiated as outlined in Department Order #601, Administrative Investigations and Employee Discipline. 4. The agency publishes their policy regarding investigations to their website: 1. https://www.geogroup.com/PREA 2. https://corrections.az.gov/prison-rape-elimination-act-prea **115.22(d)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the Arizona Department of Corrections (Client) conducts all criminal investigations of alleged sexual abuse and has a policy governing how the investigations are conducted. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.31	**Employee training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **PREA Staff Training Curriculum** • **PREA Staff Training Acknowledgement forms** • **Interviews with random staff** **Reasoning and analysis (by provision):** **115.31(a/b)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency trains all employees who may have contact with inmates on the agency’s zero-tolerance policy for sexual abuse

and sexual harassment.

2. Reported that the agency trains 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.
3. Reported that the agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment.
4. Reported that the agency trains 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.
5. Reported that the agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement.
6. Reported that the agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims.
7. Reported that the agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse.
8. Reported that the agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates.
9. Reported that the agency trains all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates.
10. Reported that the agency trains 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.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 9):
    1. Outlines that each facility shall train all employees who may have contact with individuals in a GEO Facility or Program 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. An individual in a GEO facility or program right to be free from sexual abuse and sexual harassment.
        4. The right of individuals in a GEO facility or program 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 Individuals in a GEO facility or program.
9. How to communicate effectively and professionally with individuals in a GEO facility or program, including LGBTI or Gender Non-conforming individuals.
10. How to comply with relevant laws related to mandatory reporting of Sexual Abuse to outside authorities.

2. Outlines that employee training shall be tailored to the gender of the individuals in the GEO facility or program at the employee's facility, and employees shall receive additional training if transferring between facilities that house individuals of different genders.

3. Arizona Department of Corrections Department Order 125 – Sexual Offense Reporting (p. 17-18):
    1. Outlines that all employees, and contractors with inmate contact, shall complete PREA training annually as outlined in the Annual Training Plan, and sign the PREA Training Acknowledgment, Form 1253; or if PREA training is a computer-based course, complete the online PREA Training acknowledgment. Volunteers are required to receive PREA training prior to providing volunteer services. Training shall include, but is not limited to:
        1. Training staff what to do when an actual or suspected sexual assault has occurred or been reported.
        2. Understanding the identification and referral process when an alleged sexual abuse occurs.
        3. How to report staff unlawful sexual conduct and sexual harassment, including when, how and to whom it should be reported. Emphasis shall be placed on each staff member's obligation to monitor, observe and report such behavior of other staff, and the disciplinary consequences for failing to do so.
        4. Recognizing inmates who may be vulnerable to sexual assault and possible intervention strategies.
        5. Recognizing inmates who appear to be having difficulty or require protections, such as an inmate with injuries or one who suddenly becomes very quiet and withdrawn.
        6. Recognizing an inmate who may be, is being, or has been sexually abused or the victim of extortion.
        7. Recognizing victims who may be at risk for suicide.
        8. Recognizing the signs of sexual abuse.
        9. Recognizing inmates who may be prone to victimizing other inmates, especially in regard to sexual behavior.
        10. Preserving confidentiality regarding investigations and allegations of sexual assault and unlawful sexual conduct.

11. Preservation of crime scenes and evidence in a sexual assault allegation.
12. Basic understanding of sexual abuse prevention and response techniques.
13. Recognizing that inmates who are having difficulty adjusting to the institutional environment or who are experiencing specific problems with other inmates may display verbal and non-verbal signs of anxiety or act out aggressively and methods of intervention.
14. The identification of what constitutes staff unlawful sexual conduct and/or staff sexual harassment and how to report such incidents.
15. An explanation of how inmates are harmed by staff unlawful sexual conduct and sexual harassment.
16. Descriptions of how the security of the facility is jeopardized by staff unlawful sexual conduct and harassment.
17. A statement of the legal consequences and disciplinary actions of engaging in staff unlawful sexual conduct and/or staff sexual harassment.
18. Instruction on supervising, observing and interacting with opposite gender inmates including, where appropriate, knock and announce situations.
19. Instruction on the privacy interests that inmates retain while incarcerated.
20. Unlawful sexual conduct and inappropriate staff inmate relations for all non-correctional staff including contractors.
21. Instruction on 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.

What was heard as part of a systematic review of evidence:

1. Interviews with random staff:
    1. Staff interviewed acknowledged initial and annual training on all required aspects of this standard.
    2. Staff interviewed were able to provide details regarding various aspects of the training to demonstrate their understanding.

What was observed as part of a systematic review of evidence:

1. Random review of employee training files:
    1. All files reviewed contained a signed acknowledgement by staff that training was provided and understood.
2. PREA staff training curriculum:
    1. Outlines training that includes all required aspects of this standard.

2. Training curriculum contains training tailored to both male and female detainees.

3. CACF houses only male inmates.

115.31(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that between trainings the agency does not provide refresher information about current policies regarding sexual abuse and harassment because all staff receive training annually.

What was observed as part of a systematic review of evidence:

1. A review of staff training records revealed that all current employees who may have contact with inmates received training on PREA requirements. This training is conducted annually.

115.31(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.

What was observed as part of a systematic review of evidence:

1. Reviewed samples of staff acknowledgement forms indicating that they received and understand the PREA training.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 **Evidence relied upon in making the compliance determinations:**

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **PREA contractor training curriculum**
- **PREA volunteer training curriculum**
- **Contractor/Volunteer training acknowledgement**

Reasoning and analysis (by provision):

115.32(a/b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.
    2. Reported that there were 22 volunteers who have been trained.
    3. Reported that 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.
    4. Reported that all volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.
    5. Reported that the agency maintains documentation confirming that volunteers and contractors who have contact with inmates understand the training they have received.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 10-11):
    1. Outlines that all contractors and volunteers shall receive training on GEO's Sexually Abusive Behavior Prevention and Intervention Program prior to assignment.
    2. Outlines that each facility shall ensure that all contractors and volunteers who have contact with Individuals in a GEO facility or program are trained on their responsibilities under GEO' s sexual abuse and harassment prevention, detection, and response policies and procedures.
    3. Contractors and volunteers who have contact with Individuals in a GEO facility or program shall receive annual PREA refresher training.
    4. Outlines that unless client mandates require electronic verification, contractors and volunteers shall document through signature on the PREA Basic Training Acknowledgement Form that they understand the training they have received. This form shall be used to document Annual PREA refresher Training.

	3. Review of volunteer training files revealed that annual training had been completed and acknowledged. 4. Review of contractor training files revealed that annual training had been completed and acknowledged. **What was heard as part of a systematic review of evidence:** 1. Interview with volunteer coordinator: 1. Reported that all volunteer training is conducted online and must be renewed annually. 2. Reported that volunteers must provide documentation that the training was completed and that they understand their responsibilities as it relates to sexual assault and sexual abuse.: **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.33	**Inmate education**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.33 **Evidence relied upon in making the compliance determination:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **PREA Inmate Education Manual (English) (effective 1/4/2024)** • **PREA Inmate Education Manual (Spanish) (effective 1/4/2024)** • **PREA Inmate Education Manual acknowledgement receipts** • **PREA inmate reporting options posters (English/Spanish)** • **Review of random inmate intake records** • **Interviews with intake staff** • **Interviews with random inmates who came from other facilities** • **Site review observations** **Reasoning and analysis (by provision)** **115.33(a)** **What was read a part of a systematic review of evidence:**

1. The facility PAQ:
    1. Reported that inmates receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment.
    2. Reported that 489 inmates admitted during the past 12 months were given this information.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 9):
    1. Outlines that during the intake process, facilities shall provide each individual in a GEO facility with written information on Geo's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

What was heard as part of a systematic review of evidence:

1. Interviews with intake staff:
    1. Intake staff reported that inmates are provided with information regarding the facilities zero-tolerance for sexual abuse and sexual harassment at the time of their intake.
    2. Intake staff reported that the initial orientation normally takes place the same day that the inmate arrives to the facility.
2. Interviews with random inmates:
    1. Inmates interviewed reported that they received information regarding the facility's zero-tolerance policy, and how to report incidents of sexual harassment or sexual abuse.
    2. Inmates who had been at the facility for a number of years reported that they didn't remember specifics about the orientation but were aware of the policies and ways to report.
    3. One LEP inmate reported that he did not receive any orientation material, however a review of his file revealed that he had signed acknowledging receipt of material in Spanish.
    4. Inmates interviewed reported that they received this information the same day they arrived to the facility, or the following day if they came in during the evening.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. An inmate intake was observed for an inmate that had come in that same day.
    2. Orientation included information about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, 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.

3. Information was provided in the form of a handbook.

2. Review of intake records:
    1. A random sampling of intake records revealed that inmates signed acknowledgement for receipt of PREA information during the intake process.
    2. A random sampling of intake records revealed that inmates received orientation the same or following day after arriving to the facility.
3. Review of inmate PREA education materials:
    1. PREA education materials cover all relevant materials.
    2. PREA education materials are provided in both English and Spanish.
4. Informal conversations with staff:
    1. Staff are available who are bi-lingual who can assist with translation when needed.
    2. The facility has access to a language line to use when staff are not available for translation services. The facility language line was used by the auditor to conduct an interview with a LEP inmate.

115.33(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that 489 inmates admitted to the facility in the past 12 months received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents within 30 days of intake.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 9):
    1. Requires that facilities provide comprehensive PREA education all individuals in person or through video within 30 days of intake.
3. PREA Inmate Education Manual:
    1. Manual provided to inmates during the orientation process was reviewed and found to contain all information required.
4. Inmate acknowledgement logs:
    1. Orientation sign in rosters were observed.
    2. Orientation sessions for individual inmates is maintained in the ACIS (Arizona Corrections Information System).

What was heard as a part of a systematic review of evidence:

1. Interview with intake staff:
    1. Reported that all inmates receive a more comprehensive orientation typically on the Saturday after they arrive to the facility.
2. Interviews with random inmates:
    1. Inmates interviewed stated that they received orientation within a couple of days or a week after they arrived to the facility.

115.33(c/d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that all inmates were educated within 30 days of intake.
    2. Reported that agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from sexual abuse and sexual harassment.
    3. Reported that inmate PREA education is available in formats accessible to all inmates, including those who are limited English proficient.
    4. Reported that inmate PREA education is available in formats accessible to all inmates, including those who are deaf.
    5. Reported that inmate PREA education is available in formats accessible to all inmates, including those who are visually impaired.
    6. Reported that inmate PREA education is available in formats accessible to all inmates, including those who are otherwise disabled.
    7. Reported that inmate PREA education is available in formats accessible to all inmates, including those who are limited in their reading skills.
    8. Reported that the agency maintains documentation of inmate participating in PREA education sessions.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 8-9):
    1. Requires that individuals in a GEO facility receive education each time they are transferred to/from a different facility.
    2. Requires that education be provided in formats accessible to all individuals in a GEO facility, including those with disabilities and limited English proficiency.

What was heard as a part of a systematic review of evidence:

1. Interview with intake staff:
    1. Reported that all incoming inmates receive the same PREA education regardless of if they come from another facility or not.
    2. Reported that orientation and education materials were available in both English and Spanish.
    3. Reported that if a language barrier existed, they would enlist the services of a staff member who was bilingual or utilize the Language Line.
    4. Reported that they would read materials to inmates who were unable to read or had low vision.
2. Interviews with inmates who came from another facility:
    1. Random inmates interviewed who stated that they came from another institution stated that they received the PREA education material and

orientation.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Inmate education materials were observed in both English and Spanish.
    2. Language line services were observed to be available for staff to use.
    3. Documentation from the facility identified specific staff that could be used as interpreters.
    4. Signage was observed to be in a font appropriate for individuals who may have poor eyesight to see.
2. PREA video acknowledgement receipts were randomly reviewed and found to be complete.
3. Inmate Acknowledgement of Receipt of PREA Educational Material receipts were randomly reviewed and found to be complete.

115.33(f)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 9):
    1. Outlines that key information shall be provided to individuals in a GEO facility or program on a continuous basis through readily available, handbooks, brochures, or other written materials.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Signage was observed posted throughout the facility providing options for reporting sexual abuse and sexual harassment as well as educational materials regarding PREA.
    2. Handbooks are provided to each inmate that they are able to retain.
    3. Information regarding PREA is available to inmates through tablets.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.34	Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.34

Evidence relied upon in making the compliance determination:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections (ADOC) Department Order 125 – Sexual Offense Reporting (effective 12/24/2020)**
- **PREA Specialized Training Investigating Sexual Abuse in Correctional Settings (dated June 2013)**
- **Interview with facility investigator**

Reasoning and analysis (by provision):

115.34(a/b/c/d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.
    2. Reported that the agency maintains documentation showing that investigators have completed the required training.
    3. Reported that the number of investigators currently employed who have completed the required training is two.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 14):
    1. Outlines that investigators shall be trained in conducting investigations of sexual abuse in confinement settings. The specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.
    2. Investigators shall receive this specialized training in addition to the training mandated for employees in Section F (I). Facilities shall maintain documentation of this specialized training.
3. Arizona Department of Corrections Department Order 125I – Sexual Offense Reporting (p. 19):
    1. Requires that all CIU investigators receive training in conducting sexual abuse investigations in confinement settings.
4. Curriculum for PREA Specialized Training Investigating Sexual Abuse in Correctional Settings:

1. Outlines training topics that cover all components required by this standard.

5. Certificates of training completion:
    1. Investigating Sexual Abuse in Correctional Settings course was completed by both facility investigators.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that he had completed the course: Investigating Sexual Assault in a Correctional Setting.
    2. Reported that the training covered topics that included Miranda and Garrity warnings, sexual abuse evidence collection as well as the criteria and evidence required to substantiate a case.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.35 **Evidence relied upon in making the compliance determination:** • Central Arizona Correctional Facility (CACF) PAQ • GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024) • Correct Care Solutions PREA Specialized Training Curriculum • PREA Specialized Training Acknowledgments • Interviews with medical and mental health staff **Reasoning and analysis (by provision):** **115.35(a/b/c/d)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency has policy related to the training of medical and mental health practitioners who work regularly in its facilities. 2. Reported that the number of medical and mental health care

practitioners who work regularly at the facility and have received the training required by policy is 28.
3. Reported that agency medical staff at this facility do not conduct forensic medical exams.
4. Reported that the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 9-10):
    1. Outlines that each facility shall train all full-time and part-time medical and mental health care practitioners who work regularly in its facilities on specific topic areas, including detecting signs of sexual abuse and sexual harassment, preserving physical evidence of sexual abuse, responding professionally to victims of sexual abuse and sexual harassment, and proper reporting of allegations or suspicions of sexual abuse and sexual harassment.
    2. Medical and mental health care practitioners shall receive this specialized training addition to the training mandated for employees in Section F (I) or contractors in section H (I) depending upon their status at the facility.
    3. Facility medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Forensic examinations shall be performed by a sexual assault nurse examiner (SANE) or sexual assault forensic examiner (SAFE).
    4. Facilities shall maintain documentation of this specialized training.
3. Review of training records for medical and mental health staff revealed that the training was completed as mandated by policy.

What was heard as part of a systematic review of evidence:

1. Interview with medical and mental health care workers:
    1. Confirmed that in addition to the PREA training that all staff participate in, additional training is required for medical and mental health workers.
    2. Confirmed that medical staff at the facility do not conduct forensic examinations.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

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

114.41

Evidence relied upon in making the compliance determination:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections Department Order 811 – Individual Inmate Assessments and Reviews (effective 4/8/2024)**
- **PREA Risk Assessments**
- **PREA Vulnerability Reassessment Questionnaire**
- **Site review observations**
- **Interviews with staff responsible for risk screening**
- **Interview with PREA Coordinator**
- **Interview with PREA Manager**
- **Interviews with random inmates**

Reasoning and analysis (by provision):

115.41(a/b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a policy that requires screening upon admission to a facility or transfer to another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates.
    2. Reported that policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake.
    3. Reported that 489 inmates entered the facility in the past 12 months and that 489 inmates were screened within 72 hours.
    4. Reported that risk assessment is conducted using an objective screening instrument.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. Outlines that all individuals in a GEO facility or program shall be assessed during intake and upon transfer for their risk of being sexually abused by another individual in a GEO facility or program or being sexually abusive towards another Individual in a GEO facility or program.
    2. This screening shall take place within 24 hours of arrival at all facilities utilizing an objective screening instrument. Unless mandated by client contract, facilities shall use the GEO PREA Risk Assessment Tool to conduct the initial risk screening assessment.
3. Arizona Department of Corrections Department Order 811 – Individual Inmate Assessments and Reviews (p. 3):

1. Requires that the PREA Risk Assessment Screening shall be comprised of an approved automated PREA questionnaire and other documented information. Education staff at Reception Center Intake shall administer a PREA questionnaire to all inmates within three workdays of being received. However, a questionnaire may be conducted by an individual interview in a private area in lieu of the Testing Center questionnaire, as needed. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked in accordance with 2.10.1.1, 2.10.1.7, 2.10.1.8 and 2.10.1.9.

What was heard as a part of a systematic review of evidence:

1. Interviews with staff responsible for risk screening:
    1. Reported that they conduct a risk screening on individuals coming into the facility, normally the same day they arrive, but always within 24 hours of their arrival.
2. Interviews with random inmates:
    1. Reported that they were asked questions from the risk screening either as soon as they entered the facility, or the next day if they arrived later in the evening.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Intake was observed for a inmate that had just arrived at the facility.
    2. A GEO Arizona State Prison PREA Intake Risk Screening Tool was used by staff to complete the screening.
    3. Informal conversations with staff and inmates revealed that intakes are done upon the inmate's arrival unless they arrive later in the evening in which case the screening takes place the next day.

115.41(d/e)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. Outlines that screenings shall consider:
        1. Mental, physical or developmental disability.
        2. Age.
        3. Physical build
        4. Previous incarceration.
        5. If criminal history is exclusively nonviolent
        6. Prior convictions for sex offenses against an adult or child.
        7. If perceived to be LGBTI or Gender Nonconforming.

8. If previously experienced sexual victimization.
9. His/her own perception of vulnerability.
10. Whether the inmate is detained solely for civil immigration purposes.

2. Outlines that intake screening shall also consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the facility, in assessing the risk of being sexually abusive.

2. Arizona Department of Corrections Department Order 811 – Individual Inmate Assessments and Reviews (p. 3):
    1. The PREA Risk Assessment Screening shall consider 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 and physical build of the inmate.
        3. Whether the inmate has previously been incarcerated.
        4. Whether the inmate's criminal history is exclusively nonviolent.
        5. Whether the inmate has prior convictions for sex offenses against an adult or child.
        6. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming,
        7. Whether the inmate has previously experienced sexual victimization.
        8. The inmate's own perception of vulnerability.
        9. Whether the inmate is detained solely for civil immigration purposes.
3. A GEO Arizona State Prison PREA Intake Risk Screening Tool:
    1. Considers all criteria as outlined in the standard and policy.

What was heard as part of a systemic review of evidence:

1. Interview with staff responsible for risk screening:
    1. Staff interviewed reported that the GEO Arizona PREA Intake Risk Screening Tool was used during the intake screening process and that it included all the required elements outlined in this standard.

115.41(f/g)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that policy requires that the facility reassess each inmate’s risk of victimization or abusiveness with a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

2. Reported that 489 inmates entering the facility in the past 12 months whose length of stay was for 30 days.
3. Reported that 489 inmates whose length of stay was for 30 days, or more were reassessed within 30 days of their arrival.
4. Reported that policy requires that a inmate's risk level be 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.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. Requires that GEO staff shall conduct an in-person reassessment of individuals within a set period, not to exceed 30 days from arrival at the facility. The staff shall reassess the individual's risk for victimization or abusiveness based upon any additional, relevant information received by the facility since the initial risk assessment.
3. CACF PREA Screening and Reassessment Logs:
    1. A review of screening and reassessment logs for the previous 12 months revealed that all incoming inmates received both an initial and 30-day reassessment.

What was heard as part of a systematic review of evidence:

1. Interviews with staff responsible for risk screening:
    1. Staff interviewed stated that a reassessment of inmates occurs within 30 days of their initial assessment.
    2. Staff interviewed stated that inmates would be reassessed if any additional, relevant information became available.
2. Interviews with inmates:
    1. Inmates interviewed who had entered the facility within the past 12 months provided mixed answers regarding a reassessment. Three inmates stated that they were not reassessed, two did not remember and four stated that they were asked similar questions a couple of weeks after initially arriving to the facility.

What was observed as part of a systematic review of evidence:

1. A random sample of 24 inmate files revealed that all had received a reassessment screening within 30 days of their arrival.

115.41(h)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) the

questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. Outlines that disciplining individuals in a GEO facility or program for refusing to answer or not providing complete information in response to certain screening questions is prohibited.
3. Arizona Department of Corrections Department Order 811-Individual Inmate Assessments and Reviews (p. 3):
    1. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked in accordance with 2.10.1.1, 2.10.1.7, 2.10.1.8 and 2.10.1.9.

What was heard as a part of a systematic review of evidence:

1. Interviews with staff responsible for risk screening:
    1. Staff stated that inmates would not and have not been disciplined for refusing to answer any of the questions on the risk screening.

115.41(i)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 5):
    1. Outlines that facilities shall implement appropriate controls on dissemination of responses to questions asked related to sexual victimization or abusiveness in order to ensure that sensitive information is not exploited by Employees or other Individuals in a GEO facility or program.
    2. Outlines that sensitive information shall be limited to need-to-know employees only for the purpose of treatment, programming, housing and security and management decisions.
2. Arizona Department of Corrections Department Order 811-Inmate Reviews and Reassessments (p. 4):
    1. Staff shall exercise appropriate discretion on the dissemination within the facility of responses to questions asked in accordance with this Department Order, in order to ensure sensitive information is not exploited to the inmate's detriment by staff or other inmates.

What was heard as a part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Reports that access to a inmate's risk assessment is limited to those requiring the information to make housing, work assignment, and programming/education decisions.
2. Interview with staff responsible for risk screening:
    1. Report that the completed risk screenings are all turned over to the PREA Manager who keeps them locked in his office.
3. Interview with PREA Manager:
    1. Reported that when he receives completed risk screenings, they are locked in a cabinet inside his office.
    2. Reported that the only people who have access to the screenings are the Warden and the Chief of Programs.

What was observed as part of a systematic review of evidence:

1. Site observations:
    1. File storage areas were observed to be locked with limited access.
    2. Computers access is strictly controlled, and staff only have access to files that are related to their specific assignments.
    3. All computers have lock-screens that require staff to enter a password to activate.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 **Evidence relied upon in making the compliance determination:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections Department Order 811-Individual Inmate Assessments and Reviews (effective 4/8/2024)** • **PREA Risk Assessments** • **Referral for support services examples** • **PREA Vulnerability Reassessment Questionnaire** • **Site review observations**

- **Interview with PREA Coordinator**
- **Interview with PREA Manager**
- **Interview with staff responsible for risk screening**
- **Interviews with transgender inmates**

Reasoning and analysis (by provision):

115.42(a/b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility uses information from the risk screening guide required by 115.241 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.
    2. Reported that the facility makes individualized determinations about how to ensure the safety of each inmate.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 6):
    1. Requires that screening information from standard Section D (I) shall be used to determine housing, bed, work, education, and programming assignments within the facility in order to keep potential victims away from potential abusers. The PREA compliance manager will maintain an "at risk log" of potential victims and potential abusers determined from the PREA Intake Risk Screening Assessment. The ''at risk log” will be kept current and include current housing locations. Following a reported allegation of sexual abuse, the PREA compliance manager will ensure victims are placed on the "at risk" log as soon as possible and tracked as a potential victim and housed separately from potential abusers pending the outcome of the investigation. If the investigation is determined ''unfounded", the victim may be removed from the ''at risk" log.
3. Arizona Department of Corrections Department Order 811-Individual Inmate Assessments and Reviews (p. 4):
    1. If the screening instrument indicates an inmate has a high risk of being sexually victimized or being sexually abusive, the Special Review team shall, within one workday, conduct a follow-up interview.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Reported that inmates who score “at risk,” for victimization or abuse are referred for medical and/or mental health assessments as required and tracked on an “at risk log,” which contains, at a minimum, their

status as a potential victim/perpetrator and housing location. The facility's designated PCM is responsible for reviewing each assessment to ensure proper completion and maintaining the "at risk log," to ensure potential victims and abusers are housed separately.

2. Interview with PREA Manager:
    1. Reported that inmates identified as being "at risk" for victimization or abuse are referred for a medical/mental health assessment. Information obtained is used to ensure that potential victim/ perpetrator are housed appropriately.
3. Interviews with staff responsible for risk screening:
    1. Reported that when inmates are identified as being at risk, a referral is made for a mental health assessment which they have the option of declining. The mental health referral is documented as well as the inmate's acceptance or declination. Risk assessments are used to ensure that inmates are housed appropriately to ensure their safety.

115.42(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the determination to whether or not to assign a transgender or intersex inmate to the facility is not made at the facility level.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 10):
    1. In making housing and programming assignments for Transgender or Intersex Individuals in a GEO Facility or Program, the Facility shall consider on a case-by-case basis whether the placement would present management or security problems.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Reported that GEO policy requires each facility to establish a Transgender Care Committee (TCC) consisting of the facility administrator or assistant facility administrator, chief of security, classification or case management supervisor, medical and/or mental health staff, and the PREA compliance manager. I may also be consulted as necessary. The TCC must meet as soon as possible but no later than 72 hours after the inmate's arrival. In the event the TCC cannot meet immediately, transgender inmates may be housed in medical during the 72-hour time frame. The TCC is responsible for making all decisions pertaining to housing and program assignments for transgender inmates.
    2. GEO has developed and implemented a standardized "Transgender

Care Committee (TCC) Summary," form used at each facility with the exception of those contractually required to use the client's tool. The TCC considers all information provided from the previous confinement facility and/or client, documentation generated upon intake, and information noted on the TCC summary to advise housing/program decisions and ensure the inmate's health and safety.

3. The TCC considers all information provided from the previous confinement facility and/or client, documentation generated upon intake, and information noted on the TCC Summary to advise housing/ program decisions and determine whether placement would present management of security problems.

2. Interview with the PREA Manager:
    1. Reported that all transgender and intersex inmates are interviewed to ensure that they feel safe and comfortable.
    2. Reported that the decision on which facility inmates are assigned to is made by the Arizona Department of Corrections (Client).

115.42(d)

What was read as part of a systematic review of evidence:

1. A review of the PREA assessment log:
    1. Revealed that inmates receive a reassessment every six months.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Reported that a transgender or intersex inmate's own view are given serious consideration with respect to his or her own safety.
2. Interview with PREA Manager:
    1. Reported that transgender and intersex inmates are reassessed every 6 months and that the ADOC (Client) has regular meetings with transgender and intersex inmates to ensure their continued safety.
3. Interview with staff responsible for risk screening:
    1. Reported that during the intake risk screening process, inmates who identify as transgender or intersex are asked if they feel safe or have any concerns regarding their placement. The opinion of the inmate is given serious consideration as it relates to their assignments.

115.42(e)

What was heard as part of a systematic review of evidence:

1. Interview with PREA Manager:
    1. Reported that a transgender or intersex inmate's own views with respect to his or her own safety are given serious consideration.

2. Reported that he interviews each transgender and intersex inmate to ensure they feel safe.

2. Interview with staff responsible for risk screening:
    1. Stated that transgender and intersex inmate's own views are given serious consideration when making housing and program assignments.
3. Interviews with transgender inmates:
    1. Two of the three transgender inmates interviewed stated that they were asked questions during intake regarding their safety. The third inmate did not recall if the question was asked.

115.42(f)

What was heard as a part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Reported that all inmates at CACF are given the opportunity to shower separately.
2. Interview with staff responsible for risk screening:
    1. Reported that all inmates at CACF are given the opportunity to shower separately.
    2. Reported that shower stalls in four of the housing units are equipped with shower curtains to ensure privacy for transgender and intersex inmates.
3. Interviews with transgender inmates:
    1. All transgender inmates interviewed stated that they were able to shower privately.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Common bathrooms in each of the housing areas provided individual shower stalls with shower curtains providing privacy for transgender and intersex inmates while showering.

115.42(g)

What was read as part of a systematic review of evidence:

1. CACF PREA Tracking Log:
    1. Outlines housing assignments of inmates identifying as lesbian, gay, bisexual, transgender, or intersex

What was heard as part of a systematic review of evidence:

1. Interview with PREA Coordinator:

1. Reported that there are no GEO facilities that are under any type of consent decree, legal settlement, or legal judgment.
2. Reported that lesbian, gay, bisexual, transgender, or intersex inmates are not placed in dedicated facilities, units, or wings based solely on the basis of their identification.

2. Interview with PREA Manager:
    1. Reported that the Arizona Department of Corrections (Client) determines which facility all inmates will be housed at.
3. Interview with transgender inmates:
    1. All transgender inmates interviewed reported that they did not feel they were placed in a dedicated facility or unit based solely on how they identified.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.43 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections (ADOC) Department Order 805-Protective Custody (effective 12/2/2023)** • **Interview with the Warden** • **Interview with staff who supervise inmates in segregated housing** **115.43(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the the facility has a policy prohibiting the placement of 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. 2. Reported that zero inmates at risk of sexual victimization were held in

involuntary segregation in the past 12 months.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 13):
    1. Outlines that involuntary segregated housing may be used only after assessing of all available housing alternatives has shown there are no other means of protection the individual in a GEO facility.
3. Arizona Department of Corrections Department Order 805-Protective Custody (p. 2):
    1. States that inmates at high risk for sexual victimization shall not be involuntarily placed in the Protective Custody review process 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.

What was heard as part of a systematic review of evidence:

1. Interview with Warden:
    1. Reported that inmates are not placed involuntarily in the RHU because they are at high risk of victimization unless there are no other alternatives.

115.43(b)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 13):
    1. If segregated housing is used, the individual shall have all possible access to programs and services for which he/she is otherwise eligible, and the facility shall document and justify on the form any restrictions imposed. Justification must include the services restricted, reasons for restriction, and duration of restriction.
2. Arizona Department of Corrections Department Order 805-Protective Custody (p. 15):
    1. Requires that once an inmate is approved for protective custody, they shall have access to programs, privileges, education, and work opportunities in accordance with their assigned custody level. If the department restricts access to programs, privileges, education, and work opportunities, the Deputy Warden or designee shall document on the Protective Custody Inmate Restriction Access to Programs, Form 805-12:
        1. The opportunities that have been limited.
        2. The duration of the limitation.
        3. The reasons for such limitations.

What was heard as part of a systematic review of evidence:

1. Interviews with staff who supervise inmates in Segregated Housing:
    1. Two staff members assigned to the RHU stated that there haven't been any inmates placed in the RHU because they are at high risk for sexual victimization.
    2. Staff reported that there is protocol that would be followed regarding the programs and privileges that would be available to them.
2. There were no inmates in the RHU because of risk of sexual victimization at the time of the onsite to interview.

115.43(c/d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that in the past 12 months there were zero inmates placed in involuntary segregation due to risk of sexual victimization.
    2. Reported that if an involuntary segregated housing assignment is made, the facility it affords each inmate a review every 30 days to determine the continuing need for segregation.
    3. Reported that there have been no inmates placed in segregated housing in the past 12 months.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 13-14):
    1. In cases where involuntary segregated housing is needed for longer than the initial 30 days, the facility shall review the status every 30-days to determine if ongoing involuntary segregated housing is necessary.
3. Arizona Department of Corrections Department Order 805-Protective Custody (p. 3):
    1. Requires that every 30 calendar days, the department shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 **Evidence relied upon in making the compliance determinations:**

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
- **Employee Reporting Options Poster**
- **Inmate Reporting Options Poster**
- **Inmate Handbook (revised 1/24/2024)**
- **GEO Website (Staff Reporting Information)**
- **Interview with PREA Coordinator**
- **Interviews with random staff**
- **Interviews with random inmates**
- **Site review observations**

Reasoning and analysis (by provision):

115.51(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about sexual abuse or sexual harassment, retaliation by staff or other inmates and staff neglect or violation of responsibility that may have contributed to such incidents.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 14):
    1. Outlines that each facility shall provide multiple ways for individuals in a GEO facility or program to privately report sexual abuse and sexual harassment, retaliation by other Individuals in a GEO facility or program or employees for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 7)
    1. Inmates who observe, are involved in, or have knowledge of a sexual assault shall immediately report their relevant information to a staff member.
    2. Inmates may report staff sexual misconduct and/or staff sexual harassment and inmate on inmate sexual assaults as follows:
        1. Inmate letter.
        2. Official correspondence through the United States (US) mail.
        3. PREA Hotline - When an inmate leaves a message on the PREA Hotline, designated staff members in the Office of the Inspector General will receive an email alerting them a

message was left.
1. The message will be recorded in an anonymous mailbox in the Secure Call Platform (SCP) where designated staff members can access the voicemail remotely at any time.

3. PREA Inmate Education Manual:
    1. Outlines multiple ways for inmates to make a report.

What was heard as a part of a systematic review of evidence:

1. Interviews with random staff:
    1. Staff interviewed were all familiar with multiple ways for inmates to privately report sexual abuse, sexual harassment, retaliation or staff neglect that may have contributed to such incidents. When asked, staff were able to articulate different ways available to report.
2. Interviews with random inmates:
    1. Inmates interviewed provided examples of different ways to privately report sexual abuse, sexual harassment, retaliation or staff neglect that may have contributed to such incidents.

What was observed as a part of a systematic review of evidence:

1. Site observations:
    1. Signage:
        1. Signage regarding reporting was observed throughout the facility.
        2. Signage was printed in a font that was easily readable.
        3. Signage was provided in both English and Spanish.
        4. Signage was consistent throughout the facility.
        5. Signage outlined multiple ways for inmates to make reports.
    2. Telephones:
        1. Telephones in common areas were tested and found to be operable.
        2. Hotline numbers were tested and found to be operable. A PIN was not required to make the call.
    3. Mail procedures:
        1. Addresses are provided for making written reports to outside entities.
        2. Indigent inmates are provided with stamped envelopes when they arrive to the facility and again upon request.
        3. Outgoing mail is placed in an outgoing mailbox.

115.51(b)

What was read as a part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency provides at least one way for inmates to report abuse or harassment to a public or private entity that is not a part of the agency.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 14):
    1. Outlines that facilities shall provide Individuals in a GEO facility or program contact information on how to report abuse or harassment to a public or private entity or office that is not part of GEO and that is able to receive and immediately forward reports of sexual abuse and sexual harassment to agency officials, allowing the reporting individual to remain anonymous upon request.
3. Inmate Reporting Options Poster and PREA Inmate Education Manual:
    1. Outlines multiple ways for inmates to privately report incidents to an entity that is not a part of GEO or the ADOC.
        1. Address is provided to make a report to the Arizona Department of Juvenile Corrections which is not a part of GEO and not a part of the Arizona Department of Corrections.
        2. Inmates may make this report anonymously.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Coordinator:
    1. Stated that GEO policy requires each facility to provide inmates contact information on how to report abuse or harassment to an office that is not part of the agency. At a minimum, facilities provide the contracting agency's reporting line (ADOC). Many facilities also provide contact information for local and/or national entities capable of receiving reports of abuse or harassment.
2. Interviews with random inmates:
    1. Inmates interviewed stated that they were aware of multiple ways to make a report and were able to articulate different methods.
    2. Inmates interviewed stated that they believed that the hotline numbers that were posted would allow them to remain anonymous as the telephones did not require any type of PIN to call.
3. A call to the posted PREA Hotline was made during the onsite. Information was forwarded to the facility PREA Manager regarding the call prior to the end of the tour.

115.51(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing,

anonymously, and from third parties.
    2. Reported that staff are required to document verbal reports before the end.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 14):
    1. Outlines that employees shall accept reports made verbally, in writing, anonymously and from third parties and shall promptly document any verbal reports.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (pp. 4-5):
    1. Require that staff who observe or become aware (i.e., verbally, in writing, anonymously, or from a third party) of a sexual assault, sexual conduct or sexual harassment shall:
        1. Immediately notify the Shift Commander by telephone or have another staff member make the notification.
        2. Complete an Information Report, Form 105-2, as outlined in Department Order #105, Information Reporting.

What was heard as part of a systematic review of evidence:

1. Interviews with random staff:
    1. All staff interviewed stated that they would accept both verbal and written reports from inmates and that they would immediately report the incident to their supervisor or the Facility Director.
    2. Staff reported that if they received a verbal report, they would document it and report to their supervisor.
2. Interviews with random inmates.
    1. Inmates interviewed stated that believed they could make both a verbal and a written report to a staff member if they wanted to.

115.51(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates.
    2. Reported that staff are informed of these ways through policy, company website, published hotline numbers and through training.
2. Employee Reporting Options Poster:
    1. Outlines that GEO employees reporting sexual abuse or sexual harassment may report such information to the chief of security or facility management privately if requested. They may also report sexual abuse or sexual harassment directly to the employee hotline, which is an independent, professional service, available 24 hours per day, 7 days a week on the internet at www.reportlineweb.com/

geogroup or at the toll-free phone number (866) 568-5425. Employees may also contact the corporate PREA office directly at (561) 999-5827.

3. GEO Website (Staff Reporting Information)
    1. www.reportlineweb.com/geogroup
    2. Provides staff with various methods to report sexual abuse and sexual harassment of inmates.

What was heard as part of a systemic review of evidence:

1. Interviews with random staff:
    1. Staff interviewed provided a variety of examples that were available to them to privately report sexual abuse and sexual harassment of inmates. Most staff reported that they would go to their supervisor or the Facility Director to make a report.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.52

Evidence Relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections (ADOC) Department Order 802-Inmate Grievance Procedure (effective 3/2/2022)**
- **GEO Corporate Website**
- **CACF Inmate Handbook (revised 1/24/2024)**
- **Interview with facility PREA Manager**
- **Interview with facility Grievance Coordinator**

Reasoning and analysis (by provision):

115.52(a/b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:

1. Reported that the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse.
2. Reported that agency policy allows a inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.
3. Reported that agency policy and procedure allows a inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the submit of the complaint.
4. Reported that an inmate grievance alleging sexual abuse is not referred to the staff member who is the subject of the complaint

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 14-15):
    1. Outlines that there is no time limit on when an individual in a GEO facility or program may submit a grievance regarding an allegation of sexual abuse.
    2. Outlines that individuals in a GEO facility or program have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint. Such grievance is also not referred to a staff member who is the subject of the complaint.
    3. Outlines that individuals in a GEO facility or program are not required to use any informal grievance process or attempt to resolve with employees an alleged incident of sexual abuse.
3. Arizona Department of Corrections Department Order 802-Inmate Grievance Procedure (p. 10):
    1. The exhaustion of administrative remedies for a sexual offense grievance consists of the following:
        1. The department shall not impose a time limit when an inmate may submit a grievance regarding an allegation of sexual abuse.
        2. The department may apply otherwise applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.
        3. The department shall not require an inmate to use any informal grievance process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.
        4. The unit CO IV Grievance Coordinator shall ensure 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.
4. CACF Inmate Handbook (section 8.0):
    1. The department shall not impose a time limit when an inmate may submit a grievance regarding an allegation of sexual abuse.
    2. The department may apply otherwise applicable time limits to any portion of a grievance that does not allege an incident of sexual

abuse.

3. The department shall not require an inmate to use any informal grievance process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.
4. The complex grievance coordinator shall ensure 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.

What was heard as part of a systematic review of evidence:

1. Interview with facility Grievance Coordinator:
    1. Reported that there is no time limit established for grievances alleging sexual abuse or sexual harassment.

115.52(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that agency policy and procedure require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.
    2. Reported that in the past 12 months there were zero grievances filed that alleged sexual abuse.
    3. Reported that the agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.
    4. Reported that the facility has had zero grievances in the past 12 months alleging sexual abuse.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 20):
    1. Reports that a final decision shall be issued on the merits of any portion of the grievance alleging sexual abuse within 90-days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by individuals in a GEO facility or program in preparing any administrative appeal.
    2. Facilities may claim an extension of time to respond (for good cause), of up to 70 days and shall notify the individual of the extension in writing.
    3. Reports that at any level of the administrative process, including the final level, if the individual does not receive a response within the time allotted for reply, including any properly noticed extension, the individual may consider the absence of a response to be a denial at that level.

3. Arizona Department of Corrections Department Order 802-Inmate Grievance Procedure (p. 11):
    1. The Warden or designee shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 workdays of the initial filing of the grievance. Computation of the 90 workday time period shall not include time consumed by inmates in preparing any administrative appeal.
    2. The unit CO IV Grievance Coordinator may claim an extension of time to respond, of up to 70 workdays, if the normal time period of 90 workdays for response is insufficient to make an appropriate decision. The Department shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.
    3. At any level of the administrative process, including the final level, if the inmate does not receive a written response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a written response to be a denial at that level.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Manager:
    1. Confirmed that there have been zero grievances alleging sexual abuse filed in the past 12 months.

115.52(e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that agency policy permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates to assist inmate in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.
    2. Reported that policy and requires that if a inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmates decision to decline.
    3. Reported that there were zero grievances alleging sexual abuse filed by inmates in the past 12-months.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 15):
    1. Outlines that third parties (e.g. fellow individuals in a GEO facility or program, employees, family members, attorneys and outside advocates) may assist individuals in a GEO facility or program in filing requests for administrative remedies relating to allegations of sexual abuse and may file such requests on behalf of individuals in a GEO

facility or program.

3. Arizona Department of Corrections Department Order 802-Inmate Grievance Procedure (p. 11):
    1. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be 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.
    2. If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing 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.
    3. If the inmate declines to have the request processed on his or her behalf, the Department shall document the inmate's decision.
4. CACF Inmate Handbook (section 8.0):
    1. Outlines that third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be 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.

What was observed as part of a systematic review of evidence:

1. Site review:
    1. Signage was observed posted in public areas of the facility with information relating to third party reporting.
2. GEO Corporate website outlines methods for filing reports on behalf of inmates.

115.52(f):

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a policy and established procedures for filing an emergency grievance alleging that a inmate is subject to a substantial risk of imminent sexual abuse.
    2. Reported that the agency has a policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours.
    3. Reported that there were zero emergency grievances alleging substantial ricks of imminent sexual abuse filed in the past 12 months.
    4. Reported that the agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days.

5. Reported that there were zero grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 15):
    1. Outlines that individuals in a GEO facility or program may file an emergency grievance if he/she is subject to a substantial risk of imminent sexual abuse.
    2. Outlines that after receiving an emergency grievance of this nature, the facility administrator or designee shall ensure that immediate corrective action is taken to protect the alleged victim.
    3. Outlines that an initial response to the emergency grievance to the individual is required within 48 hours and a final decision shall be provided within five calendar days.
3. Arizona Department of Corrections Department Order 802-Inmate Grievance Procedure (p. 10):
    1. Outlines that the unit CO IV Grievance Coordinator or staff member receiving an emergency grievance or an Informal Complaint alleging an inmate is subject to a substantial risk of imminent sexual abuse shall immediately forward the grievance or Complaint (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. An initial written response shall be provided to the inmate within 48 hours, and the Warden or designee shall issue a final decision within five calendar days.

What was heard as part of a systematic review of evidence:

1. Interview with PREA Manager confirmed that there have been no emergency grievances filed in the past 12 months.

115.52(g)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a written policy that limits its ability to discipline a inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.
    2. Reported that in the past 12-months there have been zero inmate grievances alleging sexual abuse that resulted in disciplinary action.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 11):
    1. Outlines the department may discipline an inmate for filing a grievance related to alleged sexual abuse only where the Department can demonstrate the inmate filed the grievance with bad faith.

	Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 **Evidence Relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections (ADOC) Department order 125-Sexual Offense Reporting** • **CACF Inmate handbook (revised 1/24/2024)** • **CACF Inmate reporting options posters** • **CACF documentation regarding efforts to obtain MOU** • **Interviews with random inmates** • **Site review observations** **Reasoning and analysis (by provision):** **115.53(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the facility provides inmates access to outside victim advocates for emotional support services related to sexual abuse. 2. Reported that the facility provides inmates with access to such services by giving inmates mail addresses and telephone numbers for local, state or national victim advocacy or rape crisis organizations. 3. Reported that the facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 20-21): 1. Outlines that facilities shall provide individuals in a GEO facility or program who allege sexual abuse (whether it occurred in custody or the community) with access to outside victim advocates for emotional support services and provide, post, or otherwise make accessible specific contact information for victim advocacy or rape crisis

organizations.

3. Arizona Department of Corrections (ADOC) Department order 125-Sexual Offense Reporting (p. 10):
    1. The Correctional Officer Ill shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse.
4. CACF Inmate Handbook:
    1. Outlines that case managers will provide you with access to outside victim advocate services for emotional support related to sexual abuse. You may also contact National advocates at the following phone number:
        1. Rape, Abuse and Incest National Network (RAINN): 1-800-656-4673 These calls can be made at no cost to you and will not be monitored.

What was heard as a part of a systematic review of evidence:

1. Interviews with random inmates:
    1. Most inmates interviewed stated that they where not aware of any specific outside support services, but commented that they were probably listed on the posters that are posted throughout the facility.
    2. Inmates interviewed stated that they believed that these services would be private and confidential.

What was observed as part of a systemic review of evidence:

1. Site review observations:
    1. Signage was observed throughout the facility with hotline numbers for advocacy services (RAINN)
    2. Signage indicated that calls were not monitored..
    3. Signage was clearly marked which services were for reporting and which were for support.
2. Hotline number for support services was tested and staff who answered the phones provided information regarding services that would be provided and well as the level of confidentiality that would be afforded.
3. Telephone calls to the hotlines do not require a PIN, so calls can be made anonymously.

115.53(b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility informs inmates, prior to giving them access to outside support services, of the extent to which such communications will be monitored.

2. Reported that the facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state or local law.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 21):
    1. Outlines that facilities shall enable reasonable communication between individuals in a GEO facility or program and these organizations as well as inform individuals in a GEO facility or program (prior to giving them access) of the extent to which GEO policy governs monitoring of their communications and when reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
3. CACF Inmate Handbook:
    1. Outlines that calls to the support hotline are not monitored.
    2. Outlines that Mental Health staff, Chaplains and religious volunteers are available for support as needed; however, they are required to report all PREA allegations if inmate discusses them during the course of counseling.

What was heard as a part of a systematic review of evidence:

1. Interviews with random inmates:
    1. Inmates interviewed stated that they believed calls to the hotline were private and knew that they did not have to enter a PIN.

115.53(c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility maintains memorandum of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 21):
    1. Outlines that facilities are required to maintain or attempt to enter into agreements with community service providers to provide individuals in a GEO facility or program with confidential emotional support services related to sexual abuse while in custody.
    2. Outlines that facilities shall maintain copies of agreements or documentation showing unsuccessful attempts to enter into such agreements.
3. Facility maintains email correspondence documenting numerous attempts to

establish an MOU with local community advocate groups.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.54	Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.54

Evidence relied upon in making the compliance determinations:

- GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)
- GEO website www.geogroup.com/PREA
- ADOC website https://corrections.az.gov/prison-rape-elimination-act-prea

Reasoning and analysis (by provision):

115.54(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency provides a method to receive third-party reports of inmate sexual abuse or sexual harassment through the agency hotline or website.
    2. Reported that agency publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates through the agency website at www.geogroup.com/PREA.
    3. Reported that agency publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates through the agency website at https://corrections.az.gov/prison-rape-elimination-act-prea.

What was heard as a part of a systematic review of evidence:

1. Interview with the PREA manager.
    1. Reported that there were no third party reports of sexual abuse or sexual harassment of a inmate during the past 12 months.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Signage was observed to be posted in public areas around the facility in the visiting area and front lobby.
    2. The GEO website was visited and found to contain all required information for making third party reports.
    3. The ADOC website was visited and found to contain all required information for making third party reports.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.61 **Evidence Relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Interview with Warden** • **Interview with PREA Coordinator** • Interview with Medical/Mental Health Staff • Interviews with random staff • Site review observations **Reasoning and analysis (by provision):** **115.61(a/b)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency requires all staff to report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not is part of the agency. 2. Reported that the agency requires all staff to report immediately and according to agency policy retaliation against inmates or staff who

reported such an incident.
3. Reported that the agency requires all staff to report immediately and according to policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
4. Reported that apart from reporting to designated supervisors or officials, agency policy prohibits staff from revealing information relating to a sexual abuse report to anyone other than to the extent necessary to make treat, investigation, and other security and management decisions.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 15-16):
    1. Outlines that employees are required to immediately report any of the following:
        1. Knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility whether or not it is a GEO facility.
        2. Retaliation against individuals in a GEO facility or program or Employees who reported such an incident.
        3. Any Employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.
        4. Outlines that apart from reporting to designated supervisors or officials, Employees shall not reveal any information related to a sexual abuse report to anyone.
3. Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (p. 17):
    1. Requires that training include topics on how to report staff unlawful sexual conduct and sexual harassment, including when, how and to whom it should be reported. Emphasis shall be placed on each staff member's obligation to monitor, observe and report such behavior of other staff, and the disciplinary consequences for failing to do so.
    2. The identity and dignity of the victim will be protected to the fullest extent possible.
    3. Except as required for investigations and criminal prosecution, any information relating to data collection, inmate and staff reports, oral or written, including all records and information associated with claims of unlawful sexual conduct, Information Reports, investigation reports, inmate information, case disposition and medical and counseling evaluation findings shall be treated as confidential.
    4. Staff shall follow existing instructions in preserving confidentiality except instructions relating to investigations.
    5. Any staff member who violates confidentiality is subject to disciplinary action..

What was heard as part of a systematic review of evidence:

1. Interviews with random staff:

1. Staff interviewed all stated that they were aware of agency policy that required them to immediately report any knowledge or suspicion of sexual abuse, sexual harassment or retaliation of inmates, including any employee neglect or violation of responsibilities that may have contributed to an incident.
2. Staff interviewed understood policy that required information related to sexual abuse and sexual harassment remain confidential except to the designated supervisors that they report the incident to.

What was observed as part of a systematic review of evidence:

1. Site observations:
    1. Files related to inmates are kept in locked cabinets within locked offices.
    2. Computer stations have automatic screen locks and are controlled by individual passwords.
    3. Staff only have access to files relevant to their position assignment.

115.61(c)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 16):
    1. Outlines that unless precluded by federal, state, or local law, medical and mental health practitioners' area required to report allegations of sexual abuse and sexual harassment and to inform individuals of the practitioner’s duty to report, and the limitation of confidentiality, at the initiation of services.
2. Inmate Handbook:
    1. Informs inmates that mental health staff, chaplains and religious volunteers are available for support as needed; however, they are required to report all PREA allegations if inmate discusses during the course of counseling.

What was heard as part of a systematic review of evidence:

1. Interview with medical and mental health staff:
    1. Both the medical and mental health staff confirmed that inmates are informed of their duty to report and the limitations of confidentiality at the start of their appointment.
    2. Both the medical and mental health staff stated that they have not had an occasion to report such an incident.

115.61(d)

	What was heard as part of a systematic review of evidence: 1. Interview with the Facility Director: 1. The Facility Director stated that any abuse of vulnerable adults would be reported to the appropriate agencies and that they would receive the same services available to all inmates. 2. Interview with PREA Coordinator: 1. Stated that unless precluded by federal, state or local law, medical and mental health practitioners are required to report allegations of sexual abuse for alleged victims under the age of 18 or considered a vulnerable adult to designated state or local services agencies under applicable mandatory reporting laws. **115.61(e)** **What was read as part of a systematic review of evidence:** 1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 21): 1. Outlines that facilities shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators or outside agency responsible for investigating these type incidents. 2. Review of allegations of sexual abuse and sexual allegations that were reported to the designated investigator (PREA Manager). **What was heard as part of a systematic review of evidence:** 1. Interview with facility director: 1. The facility director stated that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports are reported through the GEO reporting system as well as to the Arizona Department of Corrections (client). **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.62	**Agency protection duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
- **Interview with Agency Head**
- **Interview with Facility Warden**
- **Interviews with random staff**

115.62(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that what the facility learns that a inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate.
    2. Reported that in the past 12-months there were zero instances where a inmate was subject to a substantial risk of sexual abuse.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 16):
    1. Outlines that when a facility learns that an individual in a GEO facility or program is subject to substantial risk of imminent sexual abuse, it shall take immediate action to protect the alleged victim. Employees shall report and respond to all allegations of sexually abusive behavior and sexual harassment. Employees should assume that all reports of sexual victimization, regardless of the source of the report (i.e. ''third party") are credible and respond accordingly.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 4):
    1. Requires that when any staff member learns that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action to protect the inmate shall be initiated.

What was heard as part of a systematic review of evidence:

1. Interview with the Agency Head:
    1. Reported that GEO takes immediate action to protect the victim from further harm and refer him or her for necessary services (medical, mental health, etc).
2. Interview with Facility Director:
    1. Reported that the inmate would immediately be separated from other inmates and offered protective custody if warranted.
3. Interviews with random staff:

1. Staff interviewed all stated that if they became aware that a inmate was in imminent danger of sexual abuse that they would immediately separate the inmate and report to their supervisor or the facility director to determine next steps.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.63

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
- **Interview with Agency Head**
- **Interview with Warden**

Reasoning and analysis (by provision):

115.63(a/b/c/d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.
    2. Reported that in the past 12 months there were zero allegations the facility received that a inmate was abused while confined in another facility.
    3. Reported that agency policy requires the facility head to provide such notification as soon as possible but no later than 72 hours after receiving the allegation.
    4. Reported that the agency or facility documents that it has provided

such notification with 72 hours of receiving the allegation.
5. Reported that the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards.
6. Reported that in the past 12 months there have been zero allegations of sexual abuse the facility received from other facilities.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 19-20):
    1. Outlines that in the event that an individual in a GEO facility or program alleges that sexual abuse occurred while confined at another facility, the facility shall document those allegations and the facility administrator or in his/her absence, the assistant facility administrator where the allegation was made shall contact the facility administrator or designee where the abuse is alleged to have occurred as soon as possible, but no later than 72 hours after receiving the notification.
    2. Outlines that the facility shall maintain documentation that it has provided such notification and all actions taken regarding the incident. Copies of this documentation shall be forwarded to the PREA compliance manager and corporate PREA coordinator.
    3. Outlines that any facility that receives notification of alleged abuse is required to ensure that the allegation is investigated in accordance with PREA standards.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 8):
    1. Requires that upon receiving an allegation that an inmate was sexually assaulted while confined at another facility, the Warden or designee that received the allegation shall notify the appropriate agency where the alleged abuse occurred.
    2. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.
    3. The Warden or designee shall document they have provided such notification with the Significant Information Report (SIR).
    4. Upon receiving a notification from another agency involving an allegation of sexual assault or sexual harassment, the Department shall ensure the allegation is investigated in accordance with this Department Order.

What was heard as a part of a systematic review of evidence:

1. Interview with the Agency Head:
    1. Reported that f another facility or agency refers allegations of sexual abuse or sexual harassment that occurred within one of out facilities, the PREA allegations would be reported to the Director of the facility where the allegation is alleged to have occurred.
    2. Reported that regardless of how one of our facilities receives a PREA allegation that abuse occurred in one of our facilities, the allegation

will be referred to designated investigators (internal or external) for investigation. The PREA coordinator is also informed of all allegations of this type via email.

2. Interview with Facility Warden:
    1. The Warden confirmed that if information was received that an inmate had been sexually abused at another facility, he would immediately notify the head of the facility where the inmate had come from.
    2. All allegations of sexual abuse and sexual harassment would be entered into the GEO reporting portal.
    3. The Warden stated that if he received notification from another facility that a inmate had been abused while at his facility, he would ensure that an investigation was conducted according to PREA protocols.
    4. The Warden stated that there were no allegations by inmates of sexual abuse occurring in another facility, nor were any reports received from other facilities regarding inmates alleging sexual abuse at her facility.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.64

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
- **Interviews with random staff**
- **Interviews with random staff who act as first responders**

Reasoning and analysis (by provision):

115.64(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a first responder policy for allegations of

sexual abuse.

2. Reported that the policy requires that upon learning that a inmate was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser.
3. Reported that policy requires that upon learning of an allegation that a inmate was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
4. Reported that policy requires that upon learning of an allegation that a inmate was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to request that the alleged victim not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, smoking, drinking or eating.
5. Reported that the policy requires that, upon learning of an allegation that a inmate was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
6. Reported in the past 12 months, there were two allegations that an inmate was sexually abused.
7. Reported that that in the past 12 months the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence was zero.
8. Reported that of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested the alleged victim to not take any actions that could destroy physical evidence was.
9. Reported that of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested the alleged abuser to not take any actions that could destroy physical evidence was zero.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp.16-17):
    1. Outlines that upon receipt of a report that an individual in a GEO facility or program was sexually abused, or if the employee sees abuse, the first security staff member to respond to the report shall:
        1. Separate the alleged victim and abuser.
        2. Immediately notify the on-duty or on-call supervisor and remain on the scene until relieved by responding personnel.

3. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
4. 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.
5. Do not let the alleged abuser take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (section 3.0):
    1. To preserve evidence, the victim should be requested not to wash, brush their teeth, shower, urinate, defecate, smoke, eat, drink or change clothing prior to notifying mental health staff, investigators, facility chain of command or receiving a medical evaluation.
    2. Ensure the inmate victim is protected and has no contact with any other inmates. At no time will the victim be left alone until evaluated by QMHP for risk of self-harm. The suspect(s) and the victim shall not be permitted to communicate with each other and shall be escorted and held separately out of sight and sound from each other. The inmate victim shall be immediately protected on site, at the hospital and upon return to institution/facility.
    3. Ensure the inmate victim is immediately escorted to the Health Unit for examination, treatment and evaluation, and if determined appropriate by the investigator and/or qualified health care professional (QHCP) and/or QMHP, transported to the hospital emergency room for the collection of forensic evidence and medical treatment. At no time will staff leave the inmate victim alone until he/she is evaluated by a QMHP.Identify and secure the crime scene until the investigator arrives.
    4. Remove any suspect(s) from the area and isolate them until questioned by the investigator; ensure the suspect(s) does not wash, brush his/her teeth, shower, urinate, defecate, smoke, eat, drink or change clothing.

What was heard as part of a systematic review of evidence:

1. Interviews with staff who act as first responders:
    1. Staff interviewed understood their responsibilities as it relates to reporting to the scene of an alleged sexual abuse and were able to articulate the steps they would take.
    2. All staff interviewed stated that they received the same training as it relates to responding to sexual abuse allegations in the facility, regardless of if they are considered security staff or non-security staff.
    3. Non-security staff understood their responsibilities to immediately

	notify someone from security.
	
	115.64(b)
	
	What was read as part of a systematic review of evidence:
	
	1. Facility PAQ:
	  1. Reported that agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.
	  2. Reported that agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.
	  3. Reported that of the allegations that an inmate was sexually abuse made in the past 12 months, the number of times a non-security staff member was the first responder was zero.
	2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p.17):
	  1. If the first responder is not a security staff member, the responder shall be required to request the alleged victim not take any action that could destroy physical evidence; remain with the alleged victim and notify security staff.
	
	What was heard as part of a systematic review of evidence:
	
	1. Interviews with random staff:
	  1. All staff interviewed stated that they received the same training as it relates to responding to sexual abuse allegations in the facility, regardless of if they are considered security staff or non-security staff.
	  2. Non-security staff understood their responsibilities to immediately notify someone from security.
	
	Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.65	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.65 **Evidence relied upon in making the compliance determinations:**

	• **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **CACF PREA Coordinated Response Plan (effective 2/1/2024)** • **Arizona Department of Corrections Sexual Assault Checklist** • **Interview with Warden** **Reasoning and analysis (by provision):** **115.65(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the facility 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. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 2): 1. Outlines that each facility shall develop written facility plans to coordinate the actions taken in response to incidents of sexual abuse. 2. Outlines that the plans shall coordinate actions of staff first responders, medical and mental health practitioners, investigators, and facility leadership. 3. Outlines that the local PREA Compliance Manager shall be a required participant and the Corporate PREA Coordinator may be consulted as part of this coordinated response. 3. Reviewed CACF PREA Coordinated Response Plan 4. Reviewed Arizona Department of Corrections Sexual Assault Checklist **What was heard as part of a systematic review of evidence:** 1. Interview with Warden: 1. The Warden reported that ADOC Department Order 125 contains a coordinated response checklist that would be followed **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.66	**Preservation of ability to protect inmates from contact with abusers**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	115.66 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Review of Collective Bargaining Agreement (10/6/2021-10/5/2024)** • **Interview with Agency Head** • **Interview with Warden** **Reasoning and analysis (by provision):** **115.66(a/b)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since the last PREA audit. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 6): 1. States that GEO shall not enter into or renew any collective bargaining agreement or other agreement that limits a facility's ability to remove alleged employee sexual abusers from contact with any individual in a GEO facility or program pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. 3. A review of the collective bargaining agreement indicates staff can be placed on leave without pay during an investigation. **What was heard as a part of a systematic review of evidence:** 1. Interview with Agency Head: 1. Reported that none of the agency's collective bargaining agreements prohibit GEO from removing staff from contact with inmates pending the outcome of an investigation for alleged sexual abuse or harassment. 2. Interview with Warden: 1. Per interview with the Warden, the abuser can be reassigned to an area where there would be no contact with the victim. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.67
	
	Evidence relied upon in making the compliance determinations:
	
	• **Central Arizona Correctional Facility (CACF) PAQ**
	• **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
	• **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
	• **Review of retaliation monitoring logs**
	• **Interview with Agency Head**
	• **Interview with Warden**
	• **Interview with staff member charged with monitoring retaliation (PREA Manager)**
	
	Reasoning and analysis (by provision):
	
	115.67(a)
	
	What was read as part of a systematic review of evidence:
	
	1. The facility PAQ:
	    1. Reported that the agency has a policy to protect all inmate 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.
	    2. Reported that the agency designates staff members with monitoring for possible retaliation.
	    3. Reported that the PREA Compliance Manager is responsible for retaliation monitoring.
	2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 21-22):
	    1. Outlines that facilities shall implement procedures to protect individuals in a GEO facility or program and employees who report sexual abuse or sexual harassment or cooperate with investigations, from retaliation by other individuals in a GEO facility or program or employees.
	    2. Outlines that the facility PREA Compliance Manager or Mental Health personnel shall be responsible for monitoring retaliation of individuals in a GEO facility or program.
	
	115.67(b/c/d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency monitors the conduct or treatment of inmate or staff who reported sexual abuse and of inmates who reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.
    2. Reported that the agency monitors the conduct or treatment for a period of 90 days.
    3. Reported that the agency acts promptly to remedy any such retaliation.
    4. Reported that the agency continues such monitoring beyond the 90 days if the initial monitoring indicates a continuing need.
    5. Reported that there have been zero incidents of retaliation in the past 12 months.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 21-22):
    1. Outlines that facilities shall have multiple protection measures, such as housing changes or transfers for victims or abusers, removal of alleged staff or abusers from contact with victims, who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
    2. Outlines that items to be monitored for individuals in a GEO facility or program include disciplinary reports and housing or program changes.
    3. Outlines that for at least 90 days following a report of staff sexual misconduct by another employee, the facility Human Resources staff or Facility Investigator as designated by the Facility Administrator shall monitor the conduct and treatment of the employee who reported the staff sexual misconduct or employee witnesses who cooperate with these investigations to see if there are changes that may suggest possible retaliation by others, and shall act promptly to remedy such retaliation.
    4. Outlines that monitoring shall terminate if the allegation is determined unfounded. Designated staff shall meet every 30 days for 90 days with employees in private to ensure that sensitive information is not exploited by staff or others and to see if any issues exist. The Employee Assistance Program (EAP) may also be offered for emotional support services for Employees who fear retaliation.
    5. Outlines that any issues discussed shall be noted on the "Employee Protection from Retaliation”, to include corrective actions taken to address the issue.
    6. Outlines that items to be monitored for employees include negative performance reviews and employee reassignments.
    7. Outlines that if any other individual expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual as well.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (pp. 14-15):
    1. For a minimum of 90 calendar days following a report of sexual abuse, the assigned CO Ill or CO IV shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse. If there are changes that suggest possible retaliation by inmates or staff, the assigned CO Ill or CO IV shall act promptly to remedy any such retaliation. The assigned CO Ill or CO IV shall monitor:
        1. Inmate disciplinary reports.
        2. Housing or program changes.
        3. Negative performance reviews or reassignments of staff.
    2. Monitoring shall continue beyond 90 calendar days if the initial monitoring indicates a continuing need. In the case of inmates, such monitoring shall also include periodic status checks.
    3. A Deputy Warden shall review all assigned CO Ill or CO IV recommendations and approve, modify, or request further information.
4. A review of four (all) facility retaliation logs confirmed that retaliation monitoring occurred on a consistent basis and monitored housing, discipline and work/program changes as well as other concerns.

What was heard as part of a systematic review of evidence:

1. Interview with Agency Head:
    1. Agency Head reported that when a PREA incident is reported, management staff consider the best options for the victim. Things like housing changes or transfers from the facility, removal of alleged abusers (staff or inmate) and emotional support services are considered on a case-by-case basis.
    2. Reported that designated staff at each facility are assigned to monitor inmates who reported the allegation for possible retaliation. They meet with the individual in private once weekly for at least 90 days and if any issues are discovered, they are required to ensure immediate corrective action is taken to correct this issue. These meetings and any corrective actions taken are documented. Designated staff also monitor employees who report staff sexual misconduct for possible retaliation. Employees are monitored once a month for at least 90 days.
2. Interview with the Warden:
    1. Reported that protective measures would be taken to include separating the individual.
    2. Reported that the client would be notified, and retaliation monitoring would taken place.
3. Interview with Staff member charged with monitoring retaliation (PREA Manager):
    1. Reported that he regularly with individuals being monitored for

	retaliation. 2. Looks for changes in behavior that may suggest that retaliation my be occurring. 3. Looks at things like programming or housing changes. 4. Reported that monitoring will continue for 90 days or longer if needed. 5. Reported that he would continue the monitoring for as long as it was needed. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Interview with the Warden** • **Interview with staff who supervise inmates in segregated housing.** **115.68(a)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency has a policy prohibiting 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 a determination has been made that there is no available alternative means of separation from likely abusers. 2. Reported that the number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero. 3. Reported that the number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in

	the past 12 months for longer than 30 days while awaiting alternative placement was zero. 4. Reported that if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. **What was heard as part of a systematic review of evidence:** 1. Interview with Warden: 1. Reported that inmates would not be placed in involuntary segregation unless no other options were available. 2. Reported that there are weekly discussions regarding the status of all inmates housed in the RHU to determine why they are still being housed there. 2. Interview with staff who supervise inmates housed in segregated housing: 1. Reported that they could not remember a time when an inmate was placed in the RHU involuntarily for risk of being sexually abused. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (effective 12/17/2020))** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Arizona Department of Corrections Department Order 608-Criminal Investigations (effective 10/11/2023)** • **Training curriculum for "Investigating Sexual Assault in a Correctional Setting" was reviewed.** • **Site review observations** • **Interview with WardenInterview with PREA Coordinator** • **Interview with PREA Manager**

- **Interview with investigative staff**

Reasoning and analysis (by provision):

115.71(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency has a policy related to criminal and administrative agency investigations.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (p. 2):
    1. An administrative or criminal investigation shall be completed for all allegations of sexual abuse, and sexual harassment at GEO facilities.
    2. The facility administrator and contracting agencies shall be notified prior to investigating all allegations of sexual abuse and sexual harassment. Client notifications shall be documented and maintained as part of the investigative file.
    3. When the facility 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.
3. Arizona Department of Corrections Department Order 608-Criminal Investigations (p. 1):
    1. Establishes guidelines for the investigation and prosecution of inmates, employees, visitors, or any other individuals suspected of committing crimes while in the Department's jurisdiction; and ensures crimes are immediately reported, crime scenes are protected, and investigations are conducted in a prompt and professional manner.
4. Review of investigative reports:
    1. A review of investigative reports revealed that investigations were initiated as soon as an allegation was made.
    2. Investigations are conducted regardless of how allegations are made.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigative staff:
    1. The facility investigator reported that sexual abuse and any criminal investigations are handled through the client’s CIU (Criminal Investigative Unit) and AIU (Administrative Investigations Unit).
    2. Investigations are initiated immediately after allegations are made.

115.71(b)

What was read as part of a systematic review of evidence:

1. Investigating Sexual Assault in a Correctional Setting training curriculum was reviewed.
2. Training completion certificates for facility investigators was reviewed.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that he participated in specialized training for investigating sexual assault in a correctional setting.

115.71(c)

What was read as part of a systematic review of evidence:

1. A review of facility investigative files revealed that video evidence was examined, and the alleged victim and alleged perpetrator was interviewed as well as witnesses where applicable.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that in the event of a report of sexual abuse, the scene would be immediately secured. The Criminal Investigative Unit would be notified to come in.

115.71(d)

What was read as part of a systematic review of evidence:

1. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 11):
    1. In every case, investigators shall interview all potential witnesses, the victim and the suspect, if identified.
    2. When the quality of evidence appears to support criminal prosecution, investigators shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.
    3. Cases requiring review/consideration for submission for prosecutorial review/prosecution include sexual offenses.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Stated that it would be up to the CIU to make the determination of which cases would be referred for criminal prosecution.

115.71(e)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abuse Behavior and Intervention Procedure (p. 4):
    1. Outlines that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as individual in a GEO facility or program or staff.
2. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 11):
    1. Outlines that the credibility of an alleged vIctIm, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff member. An inmate who alleges sexual abuse shall not be requested to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Stated that the credibility of an alleged victim, suspect or witness is based on the evidence.

115.71(f)

What was read as part of a systematic review of evidence:

1. GEO Corporate Policy and Procedure Manual 5.1.2-E Sexually Abusive Behavior and Intervention Procedure (p. 4):
    1. Outlines that administrative investigations shall:
        1. Include an effort to determine whether staff actions or failures to act contributed to the abuse.
        2. Be documented in a written report format that includes at a minimum, a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
2. A review of investigative files revealed that staff actions were examined to determine if they may have contributed to the abuse. This information was documented in the file review paperwork.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that when reviewing administrative investigations, he

reviews video to determine if there were any staff actions that may have contributed to the incident such as missed or untimely rounds.
2. Reported that these observations are documented in the GEO tracking system.

115.71(g)

What was read as part of a systematic review of evidence:

1. There were no criminal investigative files available to review.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Stated that criminal investigations are documented in a written report that is completed by the Criminal Investigative Unit responsible for completing the investigations.

115.71(h)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that Substantiated allegations of conduct that appear to be criminal are referred for prosecution.
    2. Reported that the number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit were zero.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that there were no cases referred for criminal prosecution during this reporting period.

115.71(i)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency plus five years.
2. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 17):

1. Requires that all case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with Department Order #103, Correspondence/ Records Control.

115.71(j)

What was read as part of a systematic review of evidence:

1. Arizona Department of Corrections Order 125-Sexual Offense Reporting (p. 12):
    1. Outlines that the resignation of a staff member or the departure of an alleged abuser or victim during the course of an investigation shall not preclude an on-going criminal investigation.

What was heard as part of a systematic review of evidence:

1. Interview with the facility investigator:
    1. Reported that the CIU will continue an investigation even if an alleged victim or abuser in no longer in control of the facility.:

115.71(l)

What was heard as part of a systematic review of evidence:

1. Interview with Warden:
    1. Reported that the Criminal Investigative Unit provides regular feedback to the facility and that the facility cooperates fully in all investigations.
2. Interview with PREA Coordinator:
    1. Reported that facilities are instructed to request an update from the outside law enforcement entity at least monthly to track the status of the investigation. The investigation outcome affects monitoring for retaliation, inmate notices of outcomes, sexual abuse incident reviews.
3. Interview with PREA Manager:
    1. Reported that emails are regularly exchanged with the ADOC and communications between the two agencies is normally pretty good.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.72	Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.72

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)**
- **GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (effective 12/17/2020)**

Reasoning and analysis (by provision):

115.72(a)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency imposes a standard of preponderance of evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment can be substantiated.
2. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 13):
    1. Outlines that there shall not be any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.
3. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 4-5):
    1. Outlines that facilities shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or harassment are substantiated.
4. A review of investigative files revealed that a preponderance of evidence was used in making the findings determination on allegations of sexual abuse and sexual harassment.

What was heard as part of a systematic review of evidence:

1. Interview with facility investigator:
    1. Reported that the standard used in all investigation of sexual abuse and sexual harassment are a preponderance of evidence.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (effective 12/17/2020)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Examples of inmate notification forms** • **Interview with facility compliance administrator** • **Interview with Warden** • **Interview with facility investigator** **Reasoning and analysis (by provision):** **115.73(a/b)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that the agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency is informed, verbally or in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. 2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 11-12): 1. Outlines that at the conclusion of an investigation, the facility investigator or staff member designated by the Facility Administrator shall inform the victim of sexual abuse in writing, whether the allegation has been substantiated, unsubstantiated or unfounded. 3. Arizona Department of Corrections Department Order 608-Criminal Investigations (p. 7): 1. Outlines that following an investigation into an inmate’s allegation that he or she suffered sexual assault or abuse in a Department facility, the CIU shall inform the inmate victim at the conclusion of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. **What was heard as part of a systematic review of evidence:**

1. Interview with the facility compliance administrator:
    1. Reported that in the past 12 months there were three allegations of sexual abuse made by inmates that were all investigated by the CIU (client).
    2. Reported that two of the allegations were unfounded and one of the allegations was unsubstantiated.
    3. Reported that at the conclusion of the investigation that was unsubstantiated, the inmates had been moved to another facility and the CIU (client) was responsible for making the notifications.
2. Interview with the Warden:
    1. Reported that facility inmates are notified of the outcome of all allegations of sexual abuse and whether they were unfounded, unsubstantiated or substantiated.
3. Interview with facility investigator:
    1. Reported that when inmates are still housed at tthe facility, all are notified of the outcome of an investigation using a notification form.

115.73(c/d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that following a inmate’s allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs 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 the facility.
        3. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility.
        4. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
    2. Reported that the agency has a policy that all notifications to inmates under this standard are documented.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 11-12):
    1. If the facility did not conduct the investigation, it shall request the relevant information from the investigating agency in order to inform the individual.
    2. If the alleged abuser was an employee, the victim shall also be informed whenever:
        1. The Employee is no longer posted within the victim’s housing unit/area.
        2. The Employee is no longer employed at the facility.
        3. The facility learns that the employee has been indicted on a charge related to the Sexual Abuse within the facility.

4. The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility.

3. If the alleged abuser was another individual in a GEO Facility or Program, the victim shall also be informed whenever:
    1. The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility.
    2. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
4. The individual will be provided an updated notification at the conclusion of a criminal proceeding, if the individual is still in custody at the facility.
5. The facility's obligation to report under this section shall terminate if the individual is released from custody. If the facility did not conduct the investigation, it shall request the relevant information from the investigating agency in order to inform the individual.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 7):
    1. Following an inmate's allegation that a staff member has committed a sexual offense against the inmate, the CIU shall:
        1. Subsequently inform the inmate victim (unless determines the allegation is unfounded) whenever:
            1. The suspect has been removed from the unit or institution where the incident occurred.
            2. The suspect is no longer employed with the Department.
            3. The investigative case is submitted to the county having jurisdiction for review and charging consideration of suspect.
            4. Indictment of suspect has occurred.
            5. The suspect is convicted.
    2. Document any and all staff member movement, court actions and inmate victim notifications or attempted notifications accordingly in the CIU database.

What was heard as part of a systematic review of evidence:

1. Interview with the Facility Director:
    1. Reported that facility inmates are notified of the outcome of all allegations of sexual abuse and whether they were unsubstantiated or substantiated.
2. Interview with the facility compliance administrator:
    1. Reported that in the past 12 months there have been no allegations that a staff member has committed sexual abuse against an inmate that was substantiated or unsubstantiated.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (effective 12/17/2020)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **GEO Employee Handbook** • **Interview with PREA Manager** **Reasoning and analysis (by provision):** **115.76(a/b/c/d)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. 2. Reported that in the past 12 months the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies is zero. 3. Reported that the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the acts committed, the staff members's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. 4. Reported that in the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies is zero. 5. Reported that all terminations for violations of agency sexual a use or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies and to any relevant licensing bodies. 6. Reported that in the past 12 months the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination for violating agency sexual abuse or sexual harassment policies is zero. 2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive

Behavior and Intervention Procedure (pp. 10-11):

1. Outlines that employees may be subject to significant disciplinary sanctions for sustained violations of sexual abuse and harassment policies, up to and including termination for any employee found guilty of sexual abuse.
2. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
3. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
4. All terminations and resignation for such conduct shall be reported to law enforcement and licensing agencies, unless the activity was clearly not criminal.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (pp. 11 & 13):
    1. Private prison contractors are subject to discipline as provided for by the contract and may be referred for criminal prosecution.
    2. All employee terminations or resignations tendered by staff arising from the violations of department sexual abuse or sexual harassment policies shall be reported to the CIU, unless the activity was clearly not criminal, and to any relevant licensing bodies.
4. GEO Employee Handbook (p. 11):
    1. Failure to meet these responsibilities ay lead to disciplinary action up to and including termination.

What was heard as part of a systematic review of evidence:

1. Interview with the PREA Manager confirmed that there has been no disciplinary action taken toward an employee during this reporting period as a result of sexual abuse or sexual harassment.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.77

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **Arizona Department of Corrections Department Order 205-Contractor and Program Associate Security (effective 3/24/2022)**
- **Interview with Warden**

Reasoning and analysis (by provision):

115.77(a/b)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies and to relevant licensing bodies.
    2. Reported that agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.
    3. Reported that in the past 12 months zero contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.
    4. Reported that in the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates is zero.
    5. Reported that the facility takes appropriate remedial measures and considers 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.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 12):
    1. Outlines that any contractor or volunteer who engages in sexual abuse or sexual harassment shall be prohibited from contact with individuals in a GEO facility or program and shall be reported to law enforcement and relevant licensing bodies, unless the activity was clearly not criminal.
    2. In the case of any other violation of GEO sexual abuse or sexual harassment policies by the contractor or volunteer, the facility shall notify the applicable GEO contracting authority who will take remedial measures and shall consider whether to prohibit further contact with individuals in a GEO facility or program.
3. Arizona Department of Corrections Department Order 205 (section 5):
    1. Outlines that in the event there are allegations of contractor and/or Program Associate criminal activity, the Warden, Bureau Administrator or designee shall:

1. Immediately request the nearest Criminal Investigations Unit to conduct an investigation.
2. Determine if the subject(s) of the investigation shall be denied access to the Department location pending the outcome of the investigation.
3. Subject(s) shall be denied access pending the outcome of the investigation when the allegation is related to a felony or serious misdemeanor (i.e., assault, harassment, and endangerment).
4. Immediately notify the CCU and/or the Community Corrections Contract Liaison in writing of a denial or revocation.

What was heard as part of a systematic review of evidence:

1. Interview with the Warden:
    1. The Warden reported that if any allegations of sexual abuse or sexual harassment were to be made toward a volunteer or contractor, they would immediately be placed on admin leave and an investigation would be started.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (effective 12/14/2020)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Arizona Department of Corrections Department Order 803-Inmate Disciplinary Procedure (effective 10/24/2021)** • **Information regarding facility SOETP program** • **Interview with the Warden** • **Interview with Facility PREA Manager** **Reasoning and analysis (by provision):**

115.78(a/b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a inmate engaged in inmate-on-inmate sexual abuse.
    2. Reported that inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.
    3. Reported that in the past 12 months one administrative finding of inmate-on-inmate sexual abuse have occurred at the facility.
    4. Reported that in the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility is zero.
2. Arizona Department of Corrections Department Order 803-Inmate Disciplinary Procedure (attachment A):
    1. Outlines disciplinary action for intentionally or knowingly engaging in sexual intercourse or oral sexual contact with any person without the consent of such person.
3. Facility SOETP (Sex Offense Education & Treatment Program) was reviewed.

What was heard as part of a systematic review of evidence:

1. Interview with the Warden:
    1. The Warden stated that various levels and types of discipline may be used with inmates including charging criminally. All inmate discipline is determined by the client – Arizona Department of Corrections.
2. Interview with Facility PREA Manager confirmed that the CACF had no incidents relating to sexual abuse that resulted in disciplinary action.

115.78(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility offers SOETP classes for inmates designed to address and correct the underlying reasons or motivations for abuse.
    2. Reported that the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (p. 10-11):
    1. Outlines that if the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the

facility shall consider requiring the offending individual to participate.

115.78(e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 10-11):
    1. Outlines that disciplining an individual in a GEO facility or program for sexual contact with an employee is prohibited unless it is found that the employee did not consent to contact.

115.78(f)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegations.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 10-11):
    1. Outlines that a report of sexual abuse made in good faith by an individual in a GEO facility or program, based upon a reasonable belief that the alleged conduct occurred, will not constitute false reporting or lying.

115.78(g)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency prohibits all sexual activity between inmates.
    2. Reported that sexual activity between inmates is deemed to constitute sexual abuse only if it determines that the activity is coerced.
2. GEO Corporate Policy and Procedure Manual 5.1.2-E: Sexually Abusive Behavior and Intervention Procedure (pp. 10-11):
    1. Outlines that facilities may not deem that sexual activity between individuals in a GEO facility or program is sexual abuse unless it is determined that the activity was coerced.

	Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Interviews with inmates who reported prior victimization** • **Interview with staff responsible for risk screening** • **Review of logs documenting followup treatment** • **Review of intake records** **115.81(a/b)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioner. 2. Reported that the meeting was offered within 14 days of the intake screening. 3. Reported that in the past 12 months, all inmates who disclosed prior sexual victimization were offered a follow-up meeting with a medical or mental health practitioner. 4. Reported that medical and mental health staff maintain secondary materials documenting compliance with the above required services. 5. Reported that all prison inmates who have previously perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner. 6. Reported that the follow-up meeting was offered with 14 days of the intake screening. Reported that in the past 12 months that all inmates previously perpetrated sexual abuse. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A Sexually Abusive

Behavior and Intervention Procedure (p. 6):

1. Requires that if during the initial risk assessment, persons tasked with screening determine an individual is at risk for either sexual victimization or abusiveness, the individual shall be referred to mental health for further evaluation.
2. Any individual who is identified (pursuant to§ 115.41) to have previously experienced sexual victimization or has perpetrated sexual abuse in an institutional setting or the community shall be referred, immediately, using the Medical-Mental Health Referral form (see Attachment L), to a medical or mental health practitioner for a follow-up meeting within 14-days of the initial risk assessment.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 10):
    1. During the initial Mental Health Assessment, inmates who have:
        1. Experienced prior sexual victimization, whether it occurred in an institution setting or in the community, shall be scheduled to meet with a QMHP within 14 workdays of the assessment being completed.
        2. Perpetrated sexual abuse, whether it occurred in an institution setting or in the community, shall be scheduled to meet with a QMHP within 14 workdays of the assessment being completed.
        3. Been identified as at risk for sexual victimization, shall be scheduled to meet with a mental health practitioner within 14 workdays of the assessment being completed.
4. Secondary medical and mental health records are maintained electronically and were randomly reviewed by the auditor to determine compliance with this provision.
5. A review of risk screening records revealed that inmates who had experienced prior sexual victimization or perpetrated sexual abuse were offered follow up services.

What was heard as part of a systematic review of evidence:

1. Interviews with inmates who disclosed prior victimization:
    1. One inmate stated that he was offered counseling during the intake screening process but declined.
    2. One inmate refused to be interviewed.
    3. One inmate stated that he was offered the followup but refused.
    4. One inmate stated that he was not offered any followup. A subsequent review of files revealed that inmate was offered but declined services and acknowledged the declination in writing.
    5. One inmate stated that he couldn’t remember if services had been offered since he has been at the facility for so long.
2. Interview with staff responsible for risk screening:
    1. Reported that inmates are offered followup services, usually the same day but no later than 72 hours.

115.81(d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners.
    2. Reported that the information shared with other staff is strictly limited to informing security and management decisions including treatment plans, housing, bed, work, education, and program assignments.

What was observed as part of a systematic review of evidence:

1. Site review observations:
    1. Medical files are stored electronically, and access is strictly controlled.

115.81(e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that medical and mental health practitioners obtain informed consent from inmates beforereportinginformationi about prior sexual victimization that did not occur in an institutional setting.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 6):
    1. Medical and mental health practitioners must obtain informed consent from individuals in a GEO facility before reporting information about prior sexual victimization that did not occur in an institutional setting (unless the individual is under the age of 18).
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 9):
    1. Healthcare and mental health staff 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.

What was heard as part of a systematic review of evidence:

1. Interviews with medical and mental health staff:
    1. Medical and mental health staff all reported that they must obtain consent at the start of each session

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** • **Interviews with medical and mental health staff** • **Interviews with staff who may be first responders** **Reasoning and analysis (by provision):** **115.82(a/b/c/d)** **What was read as part of a systematic review of evidence:** 1. The facility PAQ: 1. Reported that Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. 2. Reported that the nature and scope of such services are determined by medical and mental health practitioners according to their professional judgement. 3. Reported that medical and mental staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided. 4. Reported that 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. 5. Reported that treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. 2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 20): 1. Outlines that victims of sexual abuse in custody shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as directed by Medical and Mental Health Practitioners.

	2. This access includes offering timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. All services shall be provided without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. 3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 9): 1. Treatment services will be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. **What was heard as part of a systematic review of evidence:** 1. Interviews with medical and mental health staff: 1. Report that inmate victims of sexual abuse have access to emergency medical treatment and crisis intervention services immediately. 2. Report that the need for these services is determined by medical staff. 2. Inter:iews with staff who may be first respondersL 1. Interviews indicated that staff understood their responsibilities protect the victim when responding to an incident and that access to medical treatment would be provided. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.83 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (effective 12/24/2020)** **Reasoning and analysis (by provision):**

115.83(a/b/c)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility offers 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.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 21):
    1. Outlines that each facility shall offer medical and mental health evaluations (and treatment where appropriate) to all victims of sexual abuse that occurs in any prison.
    2. The evaluation and treatment should include follow-up services, treatment plans, and (when necessary) referrals for continued care following a transfer or release.
    3. These services shall be provided in a manner that is consistent with the level of care the individual would receive in the community.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (pp. 9-10):
    1. Outlines that ongoing medical and mental health evaluation, and as appropriate, treatment shall be offered to all Arizona Department of Corrections, Rehabilitation and Reentry (ADCRR) inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
    2. The evaluation and treatment of such victims shall include, as appropriate:
        1. Follow-up services.
        2. Treatment Plans
        3. Referrals for continued care following their transfer to, or placement in, other facilities, or release from custody.
    3. The institution shall provide such victims with medical and mental health services consistent with the community level of care.

115.83(d/e/f/g)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the CACF is an all-male facility.
    2. Reported that victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.
    3. Reported that treatment services are provided without costs and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive

Behavior and Intervention Procedure (p. 21):

1. Outlines that victims shall also be offered tests for sexually transmitted infections as medically appropriate.
2. All services shall be provided without financial cost to the victim regardless of whether the victim names their abuser or cooperates with any investigation arising from the incident.

3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 9):
    1. Requires that medical staff explain to the inmate the necessity to check for sexually transmitted diseases and sexually transmitted infections prophylaxis.
    2. Treatment services will be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

115.83(h)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 21):
    1. The facility shall attempt to conduct a mental health evaluation on all known inmate on inmate or resident on resident abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by mental health practitioners.
3. Arizona Department of Corrections Department Order 125-Sexual Offense Reporting (p. 10):
    1. Institutions shall conduct a mental health evaluation of all known inmate on inmate sexual abusers within 60 calendar days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.86

Evidence relied upon in making the compliance determinations:

- Central Arizona Correctional Facility (CACF) PAQ
- GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedures (effective 1/4/2024)
- Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (effective 12/24/2020)
- Review of PREA After-Action report
- Interview with Facility Director
- Interview with the PREA Coordinator
- Interview with Facility PREA Manager

Reasoning and analysis (by provision):

115.86(a/b/c/d/e)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.
    2. Reported that the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.
    3. Reported that the facility prepares a report of its findings from sexual abuse incident review, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Coordinator.
    4. Reported that the facility implements the recommendations for improvement or documents ins reasons for not doing so.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 28):
    1. Outlines that facilities are required to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined substantiated or unsubstantiated.
    2. Such review shall occur within 30 days of the conclusion of the investigation.
    3. The review team shall consist of upper-level management officials and the local PREA Compliance Manager, with input from line supervisors, investigators and Medical or Mental Health Practitioners. The Corporate PREA Coordinator may be consulted as part of this review.
    4. Unless mandated by client contract, a " PREA After Action Review

Report” of the team's findings shall be completed and submitted to the Corporate PREA Coordinator no later than 30 working days after the review via the GEO PREA Database. The Facility shall implement the recommendations for improvement or document its reasons for not doing so.

5. The PREA Compliance Manager shall maintain copies of all completed " PREA After Action Review Reports" and a copy shall also be maintained in the corresponding investigative file.

3. Arizona Department of Corrections (ADOC) Department Order 125-Sexual Offense Reporting (pp. 13-14):
    1. Outlines that the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse and sexual harassment investigation, where the final outcome was determined to be substantiated or unsubstantiated. The sexual abuse incident review is not required when the outcome of an investigation is determined to be unfounded.
    2. The· sexual abuse incident review shall occur within 30 workdays of the conclusion of the investigation. The PREA Compliance Manager shall ensure a review of a sexual assault or sexual harassment incident is completed within 30 workdays of the investigation conclusion.
    3. The sexual abuse incident review team shall include the unit Deputy Warden, Chief of Security, and Correctional Officer IV, with input from line supervisors, investigators, and medical or mental health practitioners.
    4. The review team shall:
        1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
        2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
        3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
        4. Assess the adequacy of staffing levels in that area during different shifts.
        5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
        6. Prepare the Sexual Abuse Incident Review, Form 125-2, and report the findings, including but not necessarily limited to determinations made as outlined in 6.13.1.1 and 6.13.1.5 of this section, and any recommendations for improvement.
    5. The Sexual Abuse Incident Review form shall be submitted to the Warden, and designated PREA Compliance Manager for review.

6. The Warden shall implement the recommendations for improvement or shall document the reasons for not doing so.

4. PREA After-Action Review Report for one unsubstantiated allegation of inmate-on-inmate sexual abuse was reviewed:
    1. PREA After-Action Review was examined and found to have been completed within the required time frame.
    2. PREA After-Action Review looked at various factors, including those items identified in this standard.

What was heard as part of a systematic review of evidence:

1. Interview with the Facility Director:
    1. Reported that the facility has an incident review teams that includes the Warden, Deputy Warden and Chief of Security.
    2. Reported that line staff are involved where appropriate.
2. Interview with the PREA Coordinator:
    1. Reported that PREA compliance managers at each facility are required to upload the “PREA AfterAction Review Report,” to the agency’s secure PREA Portal within 30 days of case closure. The corporate PREA compliance team monitor these reports and work with the facility to address issues as necessary. If an after-action report necessitates corrective action at the corporate level, the PREA coordinator works with the applicable department heads to implement appropriate measures. To date, no systemic trends have been identified.
    2. Reported that the corporate PREA compliance team reviews this data annually to determine the improvements needed to enhance our PREA program. The recommended improvements are reviewed, and a recommendation is submitted to the divisional authority for Reentry for review and approval.
3. Interview with incident review team member (PREA Manager):
    1. Reported that incident reviews include things such as the race of the individuals involved and how the inmates may identify. The size and status of the inmates involved are also considered when reviewing the incident. Other factors that are looked at include camera/mirror locations, staffing levels, and physical plant issues.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.87

Evidence relied upon in making the compliance determinations:

- **Central Arizona Correctional Facility (CACF) PAQ**
- **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)**
- **GEO Annual PREA Data Report**
- **Arizona Department of Corrections Annual PREA Data Report**

Reasoning and analysis (by provision):

115.87(a/b/c/d/e/f)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that 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.
    2. Reported that the agency aggregates the incident-based sexual abuse data at least annually.
    3. Reports that the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.
    4. Reported that the Arizona Department of Corrections CIU maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
    5. Reported that the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 23):
    1. Outlines that each facility shall collect and retain data related to sexual abuse as directed by the corporate PREA coordinator.
    2. This data shall be aggregated at least annually and is required to include, at a minimum, the data necessary to answer all questions on the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).
    3. Upon request, GEO shall provide such data from the previous calendar year to the Department of Justice no later than June 30.
    4. Facility PREA compliance managers shall be responsible for compiling data collected on sexual activity, sexual harassment, and sexual abuse incidents.
    5. Facility PREA compliance managers will ensure that a PREA survey is created in accordance with GEO OPR and divisional incident reporting policies updated and submitted for review and approval in the GEO PREA portal for every allegation of sexual abuse, sexual harassment and, sexual activity as required.

3. GEO Annual Data Report was reviewed and found to contain all relevant data.
    1. https://www.geogroup.com/Portals/0/OpenContent/Files/791/PREA_Annual_Report_2022_external_final_version-1.pdf
4. Arizona Annual Data Report was reviewed and found to contain all relevant data:
    1. https://corrections.az.gov/sites/default/files/documents/reports/PREA%20Reports/Approved%20Signed%202022%20ADCRR%20Annual%20PREA%20Report.pdf

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.88	Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.88

Evidence relied upon in making the compliance determinations:

- Central Arizona Correctional Facility (CACF) PAQ
- GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 2/14/2019)
- Arizona Department of Corrections Annual PREA Data Report
- Interview with Agency Head
- Interview with Agency PREA Coordinator

Reasoning and analysis (by provision):

115.88(a/b/c/d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency reviews data collected and aggregated pursuant to 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.
    2. Reported that the annual report includes a comparison of the current year's data and corrective actions with those from prior years.
    3. Reported that the report provides an assessment of the agency's

progress in addressing sexual abuse.
4. Reported that the agency makes its annual report readily available to the public at least annually through its website.
5. Reported that the annual reports are approved by the agency head.
6. Reported that when the agency redacts material from an annual report for publication the redactions are limited to specific materials where publication would represent a clear and specific threat to the safety and security of the facility.
7. Reported that the agency indicates the nature of material redacted.

2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (pp. 23-24):
    1. Outlines that GEO shall review all data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:
        1. Identifying problem areas.
        2. Taking corrective action on an ongoing basis.
        3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.
    2. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of GEO's progress in addressing sexual abuse.
    3. The annual report shall be approved by the appropriate divisional authority and made readily available to the public upon approval. at least annually through GEO's website or the client's website as required by contract.
    4. GEO may redact 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.
3. Arizona Department of Corrections Annual Reports were examined and determined to contain all required information.

What was heard as part of a systematic review of evidence:

1. Interview with Agency Head:
    1. Reported that facilities conduct sexual abuse incident reviews after each substantiated or unsubstantiated case. Any recommendations for improvement, problem areas identified, or corrective actions needed are documented and forwarded to the corporate PREA Coordinator to review. In 2015, GEO designed a secure PREA Portal with restricted access to retain all of the PREA data. Every incident is entered into the portal by the PREA managers at each facility and annually, our corporate PREA team reviews this data to determine what improvements are needed to enhance the PREA program. These recommended improvements are submitted to the appropriate divisional authority for Secure Services, Reentry and Youth Services annually for review and approval.

2. Reported that annual PREA reports are approved by the appropriate divisional authority for Secure Services, Reentry and Youth Services and our CEO.

2. Interview with PREA Coordinator:
    1. Reported that each facility is required to complete the GEO “PREA After-Action Review Report,” after each substantiated or unsubstantiated case. Any recommendations for improvement, problem areas identified, or corrective actions needed are documented and captured in the facility’s “Annual PREA Facility Assessment.”
    2. Reported that GEO maintains a secure PREA Portal with restricted access to retain all PREA related data. Every sexual abuse incident and documentation pertaining to said incident is entered into the portal by the PREA compliance manager at each facility. The corporate PREA compliance team, to include myself, have access to this portal. The corporate PREA team reviews this data annually to determine the improvements needed to enhance the overall PREA program. These recommended improvements are submitted to the divisional authority for reentry annually for review and approval.
    3. GEO publishes a PREA report annually. Currently, annual PREA data reports from 2017-2022 are available on GEO’s website.
    4. Reported that GEO only reports statistical data and incident types. Personally identifiable information is excluded for confidentiality purposes.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 **Evidence relied upon in making the compliance determinations:** • **Central Arizona Correctional Facility (CACF) PAQ** • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (effective 1/4/2024)** • **GEO Annual PREA Data Reports** • **Arizona Department of Corrections Annual PREA Data Reports** • **Interview responses from PREA Coordinator** **Reasoning and analysis (by provision):**

115.89(a/b/c/d)

What was read as part of a systematic review of evidence:

1. The facility PAQ:
    1. Reported that the agency ensures that incident-based and aggregate are securely retained.
    2. Reported that agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.
    3. Reported that before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.
    4. Reported that the agency maintains sexual abuse data collected pursuant to 115.287 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.
2. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 24):
    1. Outlines that data collected pursuant to this procedure shall be securely retained for at least 10 years or longer if required by state statute. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.
3. Interview responses from PREA Coordinator:
    1. Reported that GEO maintains a secure PREA Portal with restricted access to retain all PREA related data. Every sexual abuse incident and documentation pertaining to said incident is entered into the portal by the PREA compliance manager at each facility. The corporate PREA compliance team, to include myself, have access to this portal.
4. Review of GEO Annual PREA Data Reports revealed that data is collected, reviewed and published annually. Reports outline trends and action taken to improve sexual safety within the facilities.
5. Review of Arizona Department of Corrections Annual PREA Data Reports revealed that data is collected, reviewed and published annually. Reports outline trends and action taken to improve sexual safety within the facilities.

Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401

	Evidence relied upon in making the compliance determinations: • **GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedures (effective 1/4/2024)** • **GEO website - https://www.geogroup.com/PREA_Certification_Information** • **GEO Annual Data Reports** **Reasoning and analysis (by provision):** **115.401(a/b)** **What was read as part of a systematic review of evidence:** 1. GEO Corporate Policy and Procedure Manual 5.1.2-A: Sexually Abusive Behavior and Intervention Procedure (p. 24): 1. Outlines that during the three-year period starting on August 20, 2013, and each three-year period thereafter, GEO's Contract Compliance Department shall ensure that each facility is audited at least once by a PREA Auditor who has been certified through the Department of Justice. 2. GEO agency website review shows that the agency has met the obligation to have a third of their facilities undergo a PREA audit in the prior year. 3. Prior CACF PREA Audit was completed in June 2021. **115.401(h/i/m/n)** **What was observed as part of a systematic review of evidence:** 1. The auditor had access to and observed all areas of the Central Arizona Correctional Facility. 2. The auditor was permitted to request and was provided with copies of all relevant documents. 3. The auditor was given a private room to conduct interviews with both inmates and staff. 4. Audit notices were posted in English and Spanish six weeks prior to the onsite and inmates were permitted to send confidential information or correspondence to the auditor in the same manner as with legal counsel. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	115.403 **Evidence relied upon in making the compliance determinations:** • **GEO website -https://www.geogroup.com/PREA_Certification_Information** • **GEO Annual Data Reports** **Reasoning and analysis (by provision):** **115.403(f)** **What was read as part of a systematic review of evidence:** 1. Per agency policy and standard requirements, GEO ensures me that this final report will be published on their website at (https://www.geogroup.com/prea) to be available to the public. 2. A review of the GEO website demonstrates compliance with the posting of final reports for other GEO facilities. **Based on this analysis the facility is substantially compliant with this provision and corrective action is not required.**

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

	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.)	na
115.13 (c)	**Supervision and monitoring**	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility’s deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	**Supervision and monitoring**	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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

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

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

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

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

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

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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	**Evidence protocol and forensic medical examinations**	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	**Evidence protocol and forensic medical examinations**	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	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 inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	**Volunteer and contractor training**	

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

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

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

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	**Inmate reporting**	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	**Inmate reporting**	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

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

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

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

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

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

	response to an incident of sexual abuse?	
115.66 (a)	**Preservation of ability to protect inmates from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	**Agency protection against retaliation**	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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