

PREA Facility Audit Report: Final

Name of Facility: Nevada Youth Training Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/01/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Kila Jager	Date of Signature: 09/01/2018

AUDITOR INFORMATION	
Auditor name:	Jager, Kila
Address:	
Email:	kilajager@preauditor.com
Telephone number:	
Start Date of On-Site Audit:	november 7, 2017
End Date of On-Site Audit:	November 9, 2017

FACILITY INFORMATION	
Facility name:	Nevada Youth Training Center
Facility physical address:	100 Youth Center Road, Elko, Nevada - 89801
Facility Phone	775-738-7182
Facility mailing address:	751 Ryland Street, Reno, Nevada - 89502
The facility is:	<input type="radio"/> County <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input type="radio"/> Detention <input checked="" type="radio"/> Correction <input type="radio"/> Intake <input type="radio"/> Other <input type="text"/>

Primary Contact			
Name:	Jennifer Simeo	Title:	PREA Coordinator
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Warden/Superintendent			
Name:	Greg Thornton	Title:	Superintendent
Email Address:	gthornton@dcfs.nv.gov	Telephone Number:	775-738-7182

Facility PREA Compliance Manager			
Name:		Email Address:	
Name:	Henri Willer	Email Address:	hwiller@dcfs.nv.gov

Facility Health Service Administrator			
Name:	Jacob Murphy	Title:	Director of Nursing Services
Email Address:	jacob.murphy@dcfs.nv.gov	Telephone Number:	702-668-4747

Facility Characteristics	
Designed facility capacity:	60
Current population of facility:	56
Age range of population:	12-18
Facility security level:	Staff secured
Resident custody level:	Adjudicated
Number of staff currently employed at the facility who may have contact with residents:	81

AGENCY INFORMATION	
Name of agency:	Division of Child and Family Services- Juvenile Justice
Governing authority or parent agency (if applicable):	Department of Health and Human Services
Physical Address:	560 Mill Street, Suite 250, Reno, Nevada - 89509
Mailing Address:	
Telephone number:	775-688-1421

Agency Chief Executive Officer Information:			
Name:		Title:	
Email Address:		Telephone Number:	

Agency-Wide PREA Coordinator Information**Name:** Jennifer Simeo**Email Address:** jsimeo@dcfs.nv.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Prison Rape Elimination Act (PREA) on-site Agency audit of the Nevada Youth Training Center (NYTC) was completed by Kila Jager from Myrtle Point, Oregon, a U.S. Department of Justice Certified PREA Auditor for Juvenile/adult facilities.

NYTC, as a facility, is assessed to be compliant with the National PREA Standards. The following report outlines the detailed process taken to certify compliance during this PREA audit.

The agency Nevada Child and Family Services, Juvenile Justice Services (DCFS.JJ) has already completed an agency audit and is compliant with the agency requirements for the PREA audit, therefore I was able to go straight to the facility for the on-site audit.

Prior to my arrival at the agency, I sent, and required posting of, the juvenile facility audit notification and auditors contact information; sent instructions to the online PREA audit and requested that NYTC open an online audit, fill out the agency information forms, complete the pre-audit questionnaire, and upload documentation requested.

Pre-audit preparation included a thorough review of all documentation and materials submitted by the agency. The documentation reviewed included agency policies, procedures, forms, organizational charts, reports, previous audits, web pages, and other PREA related materials provided to demonstrate Agency compliance with the PREA standards. I also requested specialized staff interviews be pre-scheduled over the time I would be on site and a tentative three-day schedule.

Upon arrival at NYTC, an entrance meeting was held, followed by a tour of all buildings. This included talking to staff and residents and observing all areas of each building. A list was requested of all youth housed at the facility by unit, and all staff employed by NYTC-on all shifts and units. Youth and staff were randomly selected to be interviewed. At the time of the on-site visit, NYTC did not house any limited English speaking, hearing or vision impaired, disabled, transgender, or intersex youth in the facility to be interviewed.

During the NYTC site visit, this auditor interviewed: staff, representing all shifts and units— including randomly selected and specialized staff; residents—randomly selected from units and a youth who had reported sexual abuse; a victim advocate center staff (phone); human resources staff; contracted medical professionals; onsite school staff,; and a SANE nurse(phone interview). Included in the on-site portion was additional paperwork review and documentation.

Upon completion of the three-day on-site visit, an exit interview was held to go over the initial paperwork review, site visit, interviews, practice review, observations, and ask additional questions. This review prompted a series of questions that were communicated back and forth for clarification and review.

Answers to the questions were submitted by DCFS/NYTC and included in the review.

Following the on-site visit, additional documentation was requested and provided. An extensive review of all information provided-including the site interviews, paperwork/documentation, and practice was completed, after the onsite visit. An Interim Agency Report was provided to DCFS.

That report included the Audit Findings/Initial Summary. Each standard was rated and a narrative explanation of the rationale for each rating was included. The Audit Findings/Initial Summary included a summary of the number of standards that were met, not met, exempt, or not applicable.

Recommendations for achieving compliance with each standard were provided for use in developing a Corrective Action Plan (CAP.) During the corrective action period, a corrective action plan was collaboratively developed.

During the corrective action period, requested documentation, contact with the agency, and review of documentation/changes made during the corrective action period, was thoroughly reviewed for compliance. All documentation was uploaded to the online audit file, and compliance and review was completed in the online audit format.

NYTC and DCFS, especially the PREA Coordinator and PREA Compliance Manager, worked very hard to complete the work needed and were extraordinarily creative in finding solutions to some difficult tasks.

Additional staff and resident interviews were conducted at the end of the corrective action period to determine compliance with practice and culture.

At the end of the corrective action period, and after a thorough review, as required by the National PREA Standards and the Department of Justice, Nevada Youth Training Center is 100% compliant with the National PREA standards.

The following, is the final audit report provided to Nevada Department of Child and Family Services (DCFS), detailing all phases of the audit.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

NYTC was established in 1915. The current buildings were built from 1962 to 1988. The facility consists of 12 buildings, of the living units currently being used, four are single cell housing and one housing unit is open/dorm housing. These buildings include living units-Forester, Pioneer, Indian, Mountaineer, Adventure/Frontier; R&C, administration, multipurpose/chow hall/laundry; Shop Classes; Warehouse, Gym, and Independence High School. NYTC includes an infirmary; however, Northeastern Nevada Regional Hospital is the medical facility they use for emergency medical care and forensic examinations.

Nevada Youth Training Center (NYTC) is a staff-secure juvenile facility located in Elko, Nevada. This 500-acre site is under the auspices of parent agency, Nevada Division of Child and Family Services Juvenile Justice Services (DCFS, JJ). The facility's capacity is 160, however is currently legislatively funded for 60 residents. At the time of this audit, there were 56 residents.

NYTC is an open campus area with beautifully manicured lawns and landscaping. Buildings have been maintained well and ongoing maintenance and renovations are ongoing, and in the plans.

In the last 12 months 96 residents have been admitted, with a stay of more than 10 days. The age range for residents is 12 to 18 years of age and the average length of stay is 7 months. All residents of NYTC are adjudicated. This facility is all males.

NYTC is an open campus and employs 81 staff at NYTC, who may have contact with residents. Of those 81 staff, 21 were hired in the last 12 months. In addition, there are 6 contractors and volunteers, all who have completed the required PREA trainings.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	2
Number of standards met:	36
Number of standards not met:	0
Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	5

NYTC, as a facility, is assessed to be compliant with the National PREA Standards. The following report outlines the detailed process taken to certify compliance during this PREA audit.

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.

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.311—Nevada Youth Training Camp is compliant with this standard.</p> <p>Documentation includes: Page 1 of agency Prison Rape Elimination Act (PREA) policy states that Nevada Department of Child and Family Services (DCFS) has zero tolerance for sexual abuse and sexual harassment.</p> <p>NYTC has PREA Standard Operating Procedures (SOP) This procedure outlines how the facility will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>Page 4-5 of DCFS PREA policy and page 4-5 NYTC Standard Operating Procedures (SOP) have required PREA definitions, sanctions for prohibited behaviors, and includes a description of agency strategies and responses. NYTC SOP, on page 19, defines prohibited behaviors regarding sexual abuse and sexual harassment, and both the DCFS PREA policy and NYTC SOP include the agencies strategies and responses to sexual abuse and sexual harassment, as required by this standard.</p> <p>DCFS employs a dedicated PREA Coordinator and NYTC has a PREA Compliance Manager on site. Included in documentation of this audit is the organizational chart that clearly shows that the PREA Coordinator is directly under top management at DCFS, and the PREA Compliance Manager at the facility also reports the PREA Coordinator, besides top facility management (Assistant Superintendent at NYTC).</p> <p>Interviews with PREA staff confirm that they have sufficient time and authority to do their job, however, could always use more time.</p>

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	<p>Nevada DCFS (agency) complies with this standard by including required language into contracts with both contracted agencies. This also includes monitoring language. Both contracted agencies have had PREA audits.</p>

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.313 Nevada Youth Training Center is compliant with this standard.</p> <p>Documentation reviewed to determine compliance includes: NYTC staffing plan, original staffing plan, tracking form for staffing ratio in the facility, NYTC SOP, Deviations from Staffing Plan reports, Staffing Analysis Report and request for more staff, Nevada DCFS PREA Policy, Camera schematic, shift report to track ratios, and unannounced rounds documentation/tracking.</p> <p>During the initial audit, there were excessive deviations due to staff shortages and call-ins. Staff were working overtime at a high rate, and staff positions were vacant. NYTC was working to fill their empty staff positions; however, it takes time to get staff hired, background checks completed, trained, and working.</p> <p>During the corrective action period, all staffing positions were filled. Although staff are still working overtime they have been able to reduce deviations to those that include limited and discrete exigent circumstances, by the end of this period.</p> <p>Interviews with management, random staff, specialty staff, and PREA staff confirm that overtime is more the standard instead of the exception; however, by the end of the corrective action period, the hiring of additional staff to fill vacant positions helped ease the inability to correct deviations in staffing ratio.</p> <p>NYTC's staffing plan is thorough and covers all buildings and areas within those buildings. Cameras have been installed; however, they are not all working due to lack of infrastructure to operate them. The staffing plan calls for direct-line-site supervision.</p> <p>Nevada DCFS contracted for a staffing analysis and it was completed during the corrective action period. The report calls for 12 new positions to adequately cover the PREA staffing requirements without the need for overtime.</p> <p>Phone interviews at the end of the corrective period confirmed deviations were down to immediate and exigent circumstances; however, overtime continues at a very high rate to comply with the staffing plan and PREA required ratio (1:8 and 1:16) in all areas of the facility.</p> <p>NYTC uses tracking sheets, every shift, to determine compliance with the ratio of 1:8 during the day and 1:16 at night. It is a part of the everyday tracking and involves ensuring overtime is assigned before there is the need for a deviation report.</p> <p>The NYTC SOP, on page 7, required intermediate-level or higher staff to conduct unannounced rounds—on all shifts, and at varying times. Documentation and interviews confirm that unannounced rounds are completed by upper level staff on all shifts and at varying times. They also document staffing ratios in all areas where residents are—to ensure staffing ratios are always tracked and maintained, in all areas, and on all shifts. NYTC exceeds this standard.</p>

The staffing plan is updated at least every year and includes the agency PREA Coordinator and facility management and staff. Included in this audit are staffing plans since December of 2016.

NYTC exceeds this standard in many areas. The only thing that keeps them from attaining that is the continual and high level of overtime that the facility must maintain to meet staffing ratios. The proactive action resulting in a staffing analysis will hopefully assist them in attaining up to 12 new staff to maintain ratios without excessive overtime that over time will impact safety.

115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.315: Nevada Youth Training Center (NYTC) is compliant with this standard. Documentation reviewed: NYTC SOP, DCFS PREA Policy, interviews with random staff, random youth, management, PREA staff, Exigent Circumstances for Cross Gender Pat-Down Searches form, cross-gender search curriculum and statements of understanding, sample of staff training acknowledgements/statements of understanding, and staff spreadsheet of all staff completing training and date.</p> <p>NYTC SOP, on page 7, prohibits cross-gender strip searches unless conducted by a medical professional and with a justifiable reason. The SOP also prohibits cross-gender pat-down searches, except in exigent circumstances. Zero cross-gender strip searches and/or pat-down searches were conducted in the last 12 months.</p> <p>Random staff, random resident, management, mental health and medical staff interviews confirm that zero cross-gender searches have been done, staff have all received NIC training, all staff understand policy/procedure around cross-gender searches, and zero staff have conducted cross-gender searches.</p> <p>NYTC has a form for documenting cross-gender searches and it is required to be filled out, as well as justified and documented in UNITY.</p> <p>NYTC SOP on page 7-8, prohibits staff of the opposite sex from viewing residents when showering, changing, or performing bodily functions, except if such view is incidental during routine cell (bed) checks. It also requires staff of the opposite sex to announce their presence when entering a housing unit that houses the opposite sex or areas where residents are likely to be performing bodily functions, changing, or showering. Interviews with residents, staff, management, and mental health/medical staff confirm that the staff comply with this standard.</p>

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.316: Nevada DCFS PREA Policy (300.09.3.3 page 10) contains language that complies with the PREA requirement that the agency has established procedures to provide disabled and limited English speaking, resident equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and response to sexual abuse and sexual harassment. It directs the facility to make needed accommodations for residents.</p> <p>Included in documentation are contracts for services including: All World Language Consultants contract, American Sign Language Communications Contract; Network Interpreting Service, Inc Contract, Preston Bass Interpreting Services LLC Contract; Sign Language Communications Inc. Contract; CTS Language Link Contract; Linguistic International Contract; PREA Youth Acknowledgement form; Juvenile PREA Intake Orientation form; and Limited Circumstances for Resident Interpreter form.</p> <p>Interviews with facility management, residents, intake staff, and random staff confirm that they have been trained in accessing services needed to assist youth with disabilities or limited language ability in understanding all PREA requirements, training, reporting, and rights as set out by the PREA standards. Seven contracts are in place to provide services, posters, brochures, orientation forms, and videos are in English and Spanish, and have captions. Staff interviews confirm they do not use resident interpreters, unless safety is involved, and documents the use of residents in this capacity on the Limited Circumstances for Resident Interpreter form.</p>

115.317	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.317 - NYTC complies with this standard</p> <p>Nevada DCFS PREA Policy 300.09.3.3.17 complies with the PREA required language prohibiting the hiring or promoting of anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents, who has engaged in sexual abuse, has been convicted of engaging or attempting to engage in sexual activity by force, overt, or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in this activity.</p> <p>The DCFS PREA policy requires new employees and those being promoted to have background checks and child abuse registry checks at hiring, before promotions, and at least every 5 years. This requirement is also for contractors, volunteers and interns. Additionally, signed disclosure statements are required stating they have not been involved in or engaged in sexual abuse, been convicted of engaging or attempting to engage in sexual activity by force, overt, or implied threats of force, or coercion, of if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in this activity. This is confirmed by review of files and samples of background checks/child abuse registry checks, as well as the spreadsheet with dates of hire/contracting, date of each check required, and date of next check required, and finally, interviews with staff, contractors, and volunteers.</p> <p>Included in documentation are; samples of new hires background checks and child abuse registry checks, as well as staff who were promoted; a spreadsheet of all staff, contractors, volunteers, or interns, and date of background check, child abuse registry check, promotion and checks, date next checks are required; samples of contractor checks, staff background checks and child abuse registry checks, promoted staff background checks, and child abuse registry checks; background-NYTC SAPTA Audit and Certification checks and certificate; policy on background checks for contractors, volunteers, interns, new hires, and promoted staff; DCFS hiring questions samples and certification; spreadsheet documenting DCFS calling institutional employers and asking about substantiated allegations of sexual abuse or sexual harassment—or any employee leaving during a sexual abuse allegation/investigation; PREA policy stating material omissions regarding sexual misconduct or provision of materially false information, shall be grounds for termination (page 25 of policy); PREA Policy regarding providing institutional employers, who call for references, information on substantiated allegations of sexual abuse or sexual harassment; and PREA 101 training, staff statements of understanding, and documentation of all employees receiving training.</p> <p>Review of the above policy/procedure, documentation, samples, records, training, and interviews of random, specialty, management, and PREA staff, as well as interviews with random and targeted youth, and contractors/volunteers confirm that NYTC is compliant with standard 115.317.</p>

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>NYTC is compliant with standard 115.318 - Upgrades to facilities and technologies</p> <p>NYTC has not acquired a new facility or made substantial expansion to existing facilities since August of 2012; however, they have received funding to install the infrastructure necessary to make the facility's video monitoring system, mounted in 2016, operational. Included in documentation of this audit are the quote for work needed to install the infrastructure to make the video system operational and the NYTC Video surveillance System Improvement Plan, planned camera placement, as well as the scope of work document.</p> <p>NYTC has been working for several years to get approval and funding for this video surveillance system. It appears that in the near future, this will become a reality. NYTC now has plans and a system.</p>

115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>NYTC is compliant with standard 115.321- Evidence Protocol and Forensic Medical Examinations</p> <p>Nevada DCFS PREA policy DCFS/JJ 300.09 page 17-20 complies with 115.321a- The agency is responsible to conduct only administrative sexual abuse investigations, after referral to law enforcement for criminal investigations, and conclusion of the ECSO investigation. NYTC and Elko County Sheriff's Office (ESCO) have a signed MOU noting services provided by ECSO will be investigative services. NYTC does not collect evidence in a sexual abuse case. First Responders secure the scene for law enforcement. Interviews with random staff, first responders, and PREA staff, confirmed that they do not collect evidence, but secure the scene for law enforcement.</p> <p>In addition, email documentation from ECSO states that ECSO collects evidence, conduct forensic interviews on any child under 18 years of age, ensure all medical exams on kids are done at Morning Star Health, who uses the latest edition of VOWA protocol, according to their director. by trained SANE/SART nurses and reviewed by Dr. McCloud, provide victim advocates for every victim and their family, and give referrals for other services i.e. counseling. In addition, the director of Morning Star Health stated that the protocol is developmentally appropriate as they only conduct forensic exams on those under 18. The DA's office funding pays for counseling and cover the cost of the exam.</p> <p>During corrective action, the MOU, between NYTC and ECSO was revised to clarify investigative services provided, as well as retaining confidentiality of such services, referral for prosecution, and compliance with the National Prison Rape Elimination Act. NYTC SOP, page 8b and 9, requires the facility to offer all residents who experience sexual abuse access to forensic exams. Interviews with facility medical staff, mental health staff, management, and PREA staff confirmed understanding, training, and practice that follows this requirement.</p> <p>Zero forensic exams were conducted in the last 12 months.</p> <p>Morning Star/ESCO ensures that advocates are provided for all victims of sexual abuse, and NYTC provides a back-up plan by having a trained advocate as staff. Documentation of training, certification, and interviews of trained medical staff confirm this service.</p> <p>NYTC SOP, page 9b complies with this provision. The provision of an advocate or trained staff member is documented by the PREA Compliance Manager. Interviews with PREA Staff, management, forensic staff, ESCO, and medical/mental health staff confirm that all victims of sexual abuse receive forensic exams by SAFE/SANE staff; an advocate is provided by Morning Star. If one is not available, NYTC has a trained staff available. Training documentation is included in this audit, including NIC training for mental health and medical staff, and Sexual Assault Advocate Counselor Training and Certification.</p>

115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>NYTC is compliant with PREA Standard 115.322</p> <p>Documentation, policy/procedure, reviewed during this audit include: completed investigations; clarification; staff training; administrative reports; PREA 101 training curriculum; PREA Incident Review Team Report and Administrative Investigation Report; DCFS PREA policy; NYTC SOP; investigative files; investigator training; Revised SOP; statements of understanding and acknowledgement of training; New MOU in progress; documentation of trained parole officers who will be conducting investigations as of June, 1, 2018; information about a new PREA investigator position, that will be located outside of the facility and who has previous investigation training; PREA investigative reports; staff in-service training;, and interviews with PREA investigator/parole officer/peace officer, PREA Staff, management, random staff, random youth, and specialty staff.</p> <p>During corrective action PREA investigations were assigned to trained Parole officers/peace officers after determining that facility PREA investigative staff did not have the background and training in investigations that clarifications from the Department of Justice required. NYTC and Nevada DCFS were very proactive when this issue came up in the initial PREA audit. The agency, facility, and PREA Coordinator collaborated to find a solution to this compliance issue.</p> <p>Actions towards compliance included revision of the NYTC Standard Operating Procedures (SOP) to reflect the necessary background and training required to conduct PREA investigations. Additionally, to comply with these requirements, Juvenile Parole/Peace officers who had the required background and training in conducting investigations, were trained on PREA investigations and assigned the task of conducting administrative PREA investigations.</p> <p>Nevada DCFS and NYTC did not stop there, the wanted to develop and implement a long-term solution. In doing so, a process was started to designate a new Nevada DCFS agency position, PREA Investigator. The PREA investigator will be stationed outside of the facilities, be a trained investigator with a documented background and experience in conducting investigations and will complete all required PREA investigation training to meet all requirements to conduct PREA sexual abuse administrative investigations.</p> <p>At the completion of the PREA audit and the corrective action period, NYTC's SOP was updated to reflect the necessary requirements and process for PREA investigators and PREA administrative investigations. All criminal PREA allegations were required to be referred to law enforcement. All PREA administrative investigations are referred to the designated Parole/Peace Officer/Investigator. An administrative or criminal investigation is completed for every allegation of sexual abuse and sexual harassment. Investigation referrals and investigations are documented on designated PREA forms and tracked. The PREA policy is published to the agency website, as required by the PREA standards, and the MOU with the Elko County Sheriff's Office was revised and finalized.</p>

Interviews with the Parole/Peace Officer who was designated to conduct PREA administrative investigations, PREA staff, random staff and management, confirmed investigator required training and background, all PREA allegations are referred and investigated to a conclusion, and all required documentations are completed on PREA investigative forms and PREA Investigation Review forms.

The process for a designated position as a PREA Investigator continues; however, NYTC is compliant with this standard with the proactive action taken to become compliant, as well as looking to the future for a long-term solution.

115.331	Employee training
Auditor Overall Determination: Exceeds Standard	
Auditor Discussion	
<p>Nevada Youth Training Center (NYTC) is compliant with standard 115.331</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) that includes the requirements to train all staff on the agency’s zero tolerance policy, and how to fulfill their responsibilities under Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP).</p> <p>The requirements in policy/procedure are reinforced by the Nevada DCFS zero tolerance training curriculum (PREA 101), and National Institute of Corrections (NIC) online training PREA: Your Role to Responding to Sexual Abuse, which are required trainings for all staff.</p> <p>Nevada DCFS (agency), as well as NYTC (facility) documents that all staff complete required trainings with statements of acknowledgement/understanding signed by all staff, or tests with a required proficiency rate. In addition, tracking is ongoing documenting the date each staff completed PREA initial, ongoing, and annual refresher trainings. NYTC and DCFS also provide staff with PREA updates, discussion, review, or assessed practice reminders, at unit meetings, in emails, and/or in targeted trainings.</p> <p>PREA 101 training includes: the rights of residents to be free from sexual abuse and sexual harassment (slide 64 PREA 101), the right to be free from retaliation for reporting sexual abuse and sexual harassment (PREA 101, slide 64 and 69), the dynamics of sexual abuse and sexual harassment in juvenile facilities (PREA 101, slide 16 and 19), common reactions of juvenile victims of sexual abuse and sexual harassment (PREA 101 slides 42-44), how to detect and respond to sign of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents (PREA 101 slides 42-45), how to avoid inappropriate relationships with residents (PREA 101 slides 17-19), how to communicate effectively and professionally with residents including gay, bisexual, gay, lesbian, transgender, intersex or gender nonconforming residents (PREA 101 slides 28-30), how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities (PREA 101 slide 64), relevant laws regarding the age of consent (PREA 101 slide 45), and gender bases needs and attributes (PREA 101 slides 24-27). NYTC exceeds the required covered trainings above by requiring all staff to complete the NIC online training, PREA: Your Role to Responding to Sexual Abuse, that reinforces all the above training topics in a relevant video presentation that includes real life scenarios, and tests of knowledge.</p> <p>After review of NYTC/DCFS PREA policy and procedure, training curriculum, completion certificates, statements of understanding/acknowledgement, and tracking format, and conducting interviews with random youth, random staff, targeted youth, specialty staff, management, contractors, collateral partners, and volunteers, as well as observing practice throughout the facility, NYTC is determined to exceed compliance for PREA standard 115.331.</p> <p>DCFS/NYTC has a zero-tolerance policy/procedure for sexual abuse and sexual harassment,</p>	

staff receive training above and beyond the requirements of the PREA standards, and there is widespread implementation of that training into everyday practice and culture at Nevada Youth Training Center.

115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09, page 12) that includes the requirements to train volunteers and contractors on the agency’s zero tolerance policy, and how to fulfill their responsibilities under Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP).</p> <p>At NYTC contractors and volunteers receive PREA education, based on their level of contact with residents and services they provide. (Church volunteers receive basic PREA, medical contractors, full staff and medical PREA training)</p> <p>ALL volunteers and contractors receive training in DCFS PREA policies and procedures, zero tolerance of sexual abuse and sexual harassment of any youth in custody, residents’ rights to be free of sexual abuse and harassment, definitions of sexual abuse and sexual harassment, and what and how to report. Contractors, like medical providers, receive PREA 101 staff training, NIC online staff training, PREA: Your Role to Responding to Sexual Abuse, National Institute of Corrections (NIC) PREA: Medical Health care for Sexual assault Victims in a Confinement Setting.</p> <p>All volunteers and contractors, who have contact with residents, are required to sign a PREA Acknowledgement form (samples included in this audit) that includes: their training, knowledge and awareness of Nevada DCFS PREA policies and procedures, zero tolerance for sexual abuse and sexual harassment of any youth in custody - including youth on youth or staff on youth sexual abuse or sexual harassment, and knowledge that DCFS will investigate all reports of sexual abuse or sexual harassment and address the safety and treatment needs of all youth involved in sexual abuse or sexual harassment - including discipline and prosecution of those who violate that policy.</p> <p>Also included on this form is the requirement to accept any information from a youth regarding sexual abuse or sexual harassment and the immediate report of that information to any facility staff. Included is the knowledge that they are legally bound to immediately report the information for further actions, which include criminal and/or administrative investigation, medical and/or mental health treatment, separation of the alleged victim and alleged perpetrator, collection of evidence, and other necessary protocol—noting time is of the essence in reporting sexual abuse. The signed PREA form includes definitions of sexual abuse, specifically between ANY employee, volunteer, vendor, intern, or another resident, and the fact that these sexual acts are always illegal, and by law, considered non-consensual. Finally, after training based on their level of contact and services provided, the volunteer/intern/contractor goes over the PREA acknowledgement form, signs it, and it is filed and tracked to ensure yearly refresher trainings are completed.</p> <p>Nevada DCFS (agency), as well as NYTC (facility) documents that all volunteers and contractors complete required trainings with signed statements of acknowledgement/understanding, or tests-with a required proficiency rate. In addition, tracking</p>

is ongoing, documenting the date each training is completed – including initial, ongoing, and annual refresher trainings.

After review of NYTC/DCFS PREA policy/procedure, training curriculum, completion certificates, statements of understanding/acknowledgement, and tracking forms; and, conducting interviews with specialty staff, management, contractors, PREA staff, and volunteers, as well as observing practice throughout the facility, NYTC is determined to be compliant for PREA standard 115.332.

115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center is compliant with standard 115.333</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (page 9-10) that includes the requirements for the resident intake process which includes residents receiving information explaining, in an age appropriate fashion, DCFS/JJ's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse and sexual harassment under Nevada DCFS/JJ sexual abuse and sexual harassment prevention, detection, reporting, and response policies and NYTC's Standard Operating Procedures (SOP), page 9-10.</p> <p>At resident intake, the PREA Acknowledgement form is reviewed with the resident, point by point to ensure resident understanding. It includes: the zero tolerance policy towards all forms of sexual abuse and sexual harassment of residents under supervision or custody—including youth on youth and staff on youth sexual abuse and sexual harassments and information of such conduct sanctions, disciplinary sanctions or criminal prosecution; the right to be free from sexual abuse and sexual harassment and retaliation from reporting such; that sexual activities between youth and youth and staff and youth are not allowed, even if consensual; how and who to report to – including written, verbal, phone, outside reporting source and online; and signature stating review and understanding of this information.</p> <p>Within 10 days of resident intake, NYTC provides a comprehensive age-appropriate PREA education through a one-on-one review and question session, using the PREA Orientation form (completed forms reviewed and samples are included in this audit documentation). This form is read and explained to the resident to ensure understanding for all residents—including limited reading, hearing impaired, cognitive and/or developmental delays, comprehension or mental health issues, and other disabilities. Residents who are deaf are provided with an interpreter to ensure the same education as all other residents, and, those that are limited English speaking, will be accommodated by using one of the agency's many language contractors to ensure receipt of the same PREA education as all other residents. Contracts and language lines are included in audit documentation.</p> <p>To complete the comprehensive PREA education, the resident views a PREA educational video, captioned and available in Spanish. A discussion follows to ensure understanding for all residents.</p> <p>All residents receive the same PREA education, even if they are transferring from another facility, without exception (PREA policy 300.9, page 9, and tracking form). All residents of the facility received the above education.</p> <p>NYTC ensures that the following PREA information is always readily available: PREA posters, PREA brochures, student handbooks, parent handbooks, and PREA reminder cards. All are available in English and Spanish.</p>

NYTC tracks on the PREA Youth Education and Risk Assessment Tracking Form, the date of intake where residents receive information regarding the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment; and comprehensive youth PREA education-within 10 days of intake (Youth Orientation Form and PREA education Video).

PREA educational information and material readily available and utilized at NYTC include: PREA brochure, PREA posters, PREA Youth Acknowledgement Form, Juvenile PREA Intake Orientation form (must be signed by both staff and resident and initialed point-by-point), student handbook, parent handbook, and PREA reminder cards for staff and parents. All materials are provided in Spanish.

After review of NYTC/DCFS PREA policy, NYTC SOP, resident intake forms and process, resident educational materials, posters, video, and brochures, completed orientation forms, completed Youth Acknowledgement forms, the Youth Education and Risk Assessment Tracking Form; and conducting interviews with specialty staff-including intake staff an resident training staff, management, PREA staff, random staff and random and targeted residents, as well as observing practice throughout the facility, NYTC is determined to be in compliance for PREA standard 115.333.

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>At the conclusion of this PREA audit NYTC is in compliance with standard 115.334</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) that includes the requirement that in addition to the general training provided to all employees, pursuant and documented in 115.331, DCFS requires and ensures that its PREA investigators, receive training in conducting such investigations in confinement settings, and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) Page 18-19 and the National Prison Rape Elimination Act (PREA) standards.</p> <p>At the beginning of the corrective action period, PREA investigators were facility-based upper-level NYTC staff who had completed specialized training in conducting PREA investigations in confinement. They were dedicated, well trained staff who conducted administrative PREA investigations with steadfast determination to comply with all PREA standards; however, the Department of Justice (DOJ) clarification for this standard required that PREA investigators bring strong investigatory skills and prior experience to the agency position of PREA Investigator, and additionally acquire high-level, advanced PREA training, in conducting PREA administrative investigations in confinement settings to add to their strong investigative background.</p> <p>Immediately and proactively, DCFS and NYTC found an immediate short-term solution and implemented it. DCFS designated a trained parole/peace officer, with the required DCFS employee training, investigative background and experience, and had completed training required by this PREA standard to immediately conduct all PREA investigations for NYTC. Next, DCFS sought a MOU with the Nevada Department of Corrections OIG's office to use their trained and compliant PREA Investigators to conduct PREA investigations for NYTC and all DCFS juvenile facilities. Amazingly, and with tireless work by the DCFS PREA Coordinator and agency, DCFS and the Nevada Department of Corrections OIG's office were able to put this MOU into practice by June 2018.</p> <p>While working on the above actions changes were made and approved to the DCFS PREA policy, NYTC SOP, and PREA investigative practice, for not only NYTC, but all DCFS juvenile facilities.</p> <p>By the end of the corrective action period, the revised NYTC SOP requires qualified PREA investigators from the DCFS Parole unit or Department of Corrections OIG's office to conduct all PREA administrative investigations.</p> <p>DCFS requires investigators to bring strong investigatory skills and experience to the agency position of PREA Investigator. The PREA Investigator is additionally required to acquire high-level, advanced PREA training, in conducting PREA administrative investigations in confinement settings, to add to their already strong investigative background and required general DCFS employee training.</p>

The OIG PREA investigators have documented training in techniques for interviewing juvenile sexual abuse victims proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement and criteria and evidence required to substantiate a case for administrative action or prosecution referral, such documentation is included in this audit.

Nevada DCFS continues the process to ensure PREA investigations are conducted by a trained and experience investigator; however, the future investigator will have not only an emphasis on conducting PREA investigations in confinement, but in juvenile confinement. DCFS is currently requesting that their next budget contain funding for a dedicated PREA Investigator position with all the experience and training the PREA standard requires but dedicated and trained in conducting investigations in Juvenile confinement. Additionally, this position will be located outside of all DCFS facilities. The approximate start date for recruitment is July 1, 2019.

Elko County Sheriff's Office will continue to conduct criminal investigations for NYTC—per the revised MOU.

At the end of the corrective action period, Nevada DCFS and NYTC has worked diligently and creatively to become compliant with standard 115.334-specialized training: Investigations.

After review of the revised NYTC/DCFS PREA policy and NYTC SOP, investigators training, investigative curriculum, MOU with the Elko County Sherriff's Department and Department of Correction OIG, and training completion documentation; and, conducting interviews with specialty staff, management, PREA staff, Nevada Juvenile Parole PREA Investigator, as well as assessing practice, NYTC is assessed compliance with PREA standard 115.334 in policy/procedure, practice, and culture.

115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.335.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 12, that ensures that all full and part time medical and mental health care practitioners, who work regularly in its facilities, have specialty training regarding how to detect and assess signs of sexual abuse and sexual harassment, preserving evidence, and how or whom to report allegations or suspicions of sexual abuse and sexual harassment; and, how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>There are two nurses and three mental health staff at NYTC. The NYTC medical and mental health professionals have completed PREA 101 staff training, and the National Institute for Corrections (NIC) trainings PREA: Your Role to Responding to Sexual Abuse; Medical Health Care for Sexual Assault Victims in a Confinement Setting; and/or Behavioral Health Care for Sexual Abuse Victims in a Confinement Setting. Specialty staff at NYTC, like these, also receive refresher training and annual refreshers.</p> <p>Certificates are included in the Audit Documentation. As is a spreadsheet showing training and dates all required training occurred and review confirmed all medical and mental health staff completed and either tested for understanding or completed a statement of understanding.</p> <p>Interviews with both Mental Health Staff and Medical Staff confirmed completion of required trainings, as well as understanding and practice established at NYTC. The staff were knowledgeable, and able to establish how their trainings developed into practice and integrated into medical or mental health practice.</p> <p>Medical Staff do not conduct forensic examinations in the facility.</p> <p>After review of the NYTC/DCFS PREA policy, NYTC SOP, PREA 101 training and documentation of attendance and understanding, NIC specialized trainings and certificates, and, conducting interviews with medical and mental health staff, and PREA staff, as well as assessing practice, NYTC is assessed exceeding compliance with PREA standard 115.335 in policy/procedure, practice, and culture.</p>

115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Division of Child and Family Services (DCFS)/Juvenile Justice Services complies with PREA National standard 115.341.</p> <p>The agency has a Prison Rape Elimination Act (PREA) Policy DCFS/JJ 300.09 and on page 13-14 requires risk screening upon admission to a facility for risk of sexual abuse victimization or sexual abusiveness toward other residents. The PREA policy requires resident risk-screening within 72 hours of intake; however, the policy did not address the requirement of 115.3414a, that required risk-reassessment periodically throughout their confinement.</p> <p>During the initial audit, completed risk-assessments were reviewed, random residents and risk screening staff interviewed, and training curriculum evaluated. This auditor confirmed that risk assessments are completed at intake, using an objective screening tool 115.342b – exceeding the requirement of standard 115.341a that requires completing them within 72 hours of intake. 115.341c – Review of completed assessments and random youth, as well as risk assessment staff interviews confirm that all categories required are included on the standard risk assessment tool.</p> <p>115.341d – Nevada DCFS PREA Policy and practice includes additional screenings through conversation, medical and mental health screenings, review of court records, case files, facility behavioral records and other relevant documentation from the case file to incorporate with the risk screening to determine additional information that may indicate heightened needs for supervision, safety precautions, or separation from other residents. Included in documentation of this audit are: the PREA policy; NYTC SOP; the standard risk-screening tool, and samples of completed risk-assessments.</p> <p>115.341e – Nevada DCFS PREA policy page 14.4 complies with the requirement that information is confidential. Interviews with random and specialty staff, as well as random youth confirms that information is kept confidential, and on a need to know basis.</p> <p>In the corrective action period, the Nevada Youth Training Camp (NYTC) Standard Operating Procedure (SOP) was changed to include parameters, on page 10-11, section D, letter c, for rescreening youth periodically to meet PREA National Standard 115.341 a4. Mental Health staff, who screen for risk at intake were trained on the new parameters and have since completed reassessments of those youth. Statements of understanding/acknowledgement, of the rescreening parameters training are included in audit documentation, as well as samples of risk reassessments.</p> <p>The SOP changes include parameters that constitute a risk reassessment (referral, request, involvement in a PREA allegation as a youth victim or youth perpetrator, or receipt of additional information that bears on the youth’s risk of sexual victimization or abusiveness). Additionally, NYTC reformatted the PREA Risk Assessment form to automatically total the risk screening numbers.</p>

At the end of the corrective action period mental health staff and residents were interviewed. Interviews confirmed the risk reassessment training, staff knowledge of the SOP changes, risk-reassessments completed, and the ongoing practice of conducting risk-rescreening's periodically throughout a residents confinement.

115.342	Placement of residents
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1468 403">Nevada Division of Child and Family Services (DCFS)/Juvenile Justice Services complies with PREA National standard 115.342.</p> <p data-bbox="252 459 1476 705">Nevada Youth Training Camp (NYTC) tracks resident intake date, initial PREA education at intake and within 10 days of intake, risk assessment, reports of sexual abuse or perpetration, housing resident will be in and reason for that choice, referral for medical/mental health follow-up made within 72 hours of any report, if medical/mental health follow-up occurred within 14 days, and 60 day mental health evaluation for youth perpetrator. The tracking sheet is included in documentation of this audit.</p> <p data-bbox="252 750 1444 963">Interviews with intake, random, medical/mental health, management, and specialty staff, as well as random youth, confirm that a risk assessment is completed at intake, additional information is gathered from all sources available, including the resident, and housing and program assignments, as well as follow-up services with medical and mental health occur in the time-frames required by PREA Standard 115.342a.</p> <p data-bbox="252 1008 1468 1220">In addition, NYTC Standard Operating Procedure (SOP), on page 11, clearly outlines how the information gathered is to be used to make decisions regarding resident housing, bed, program, education, and work assignment. Also, review of case files and any isolation occurring in the last 12 months confirms NYTC is compliant with this standard in keeping residents safe and free from sexual abuse.</p> <p data-bbox="252 1265 1468 1601">115.342b – The NYTC SOP on page 11c and d complies with this standards Policy requirements. Zero residents were placed in isolation for risk of sexual victimization in the last 12 months. The NYTC SOP states that residents shall only be isolated from the group if the youth is a danger to others or for protection from others. This will be reevaluated every seven days – exceeding the PREA requirement of every 30 days. Safety reviews are built in to determine if a resident should be moved, involving staff and supervisors, and if the victim is moved, it requires the resident receives normal programming, and activities – with modifications for safety issues if necessary.</p> <p data-bbox="252 1646 1452 1780">During corrective action NYTC and the agency DCFS clarified in policy, training for staff, and practice, how the determination is to be made and documented, if the alleged victim is to be moved to ensure his safety.</p> <p data-bbox="252 1825 1444 1993">Included in this audit documentation are: staff training curriculum for First Responder duties that include the decision to move an alleged victim or alleged perpetrator, including documentation and approvals necessary, and receiving normal programming or equivalent class or activity – with any modifications for safety, as required by this standard.</p> <p data-bbox="252 2038 1484 2116">Zero residents at risk were placed in isolation, for risk of sexual victimization, during the last 12 months.</p>

115.342c – NYTC SOP complies with this standard. Page 11b prohibits placing lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely based on identification of status or considering their status or identification as an indicator of likelihood of being sexually abusive.

Interviews with PREA staff, random youth, random staff, and management, and review of training, policy, and procedure, confirms that NYTC complies with the requirements of this standard, in paperwork, practice, culture, and their own policy/procedure. There were no residents identified to be lesbian, gay, bisexual, transgender, or intersex to interview in the facility at the time of the interviews.

115.342d – NYTC SOP, page 11 complies with the requirements that the facility makes housing and program assignments for transgender or intersex residents on a case-by-case basis. Interviews with PREA staff, random staff, and management confirmed compliance with this standard.

115.342e/f – NYTC SOP complies with the requirement that placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety. Interviews with PREA staff and mental health screening staff confirm knowledge, training, tracking, understanding, and respect for the views of any transgender or intersex resident regarding his/her safety, in compliance of this PREA standard.

115.342g – NYTC policy/procedure complies with the requirement that transgender or intersex residents are given the opportunity to shower separate from other residents. Random staff, management staff, PREA staff, and mental/medical staff confirmed in interviews the understanding of procedure, training, and practice of this standard.

115.342 h/i – Zero residents have been held in isolation for risk of sexual victimization at NYTC in the last 12 months. NYTC SOP on page 11, is clear that if a resident at risk of sexual victimization is held in isolation, a review is conducted every 7 days and usually sooner. This clearly exceeds the 30 days required in the PREA standards and indicates NYTC's clear commitment to not using isolation.

115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.351.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) on pages 14-15 that establish multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents; and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>NYTC has established multiple ways for residents to report sexual abuse, sexual harassment, retaliation, or staff neglect. Reporting methods include: directly to a staff, supervisor, mental health staff, medical staff, attorney, parents, online, PREA hotline 211, written grievance form, and directly to the NYTC PREA Compliance Manager, or DCFS PREA Coordinator by phone.</p> <p>During the initial site visit, there was confusion about the Grievance Form being the way staff directed youth to report. During corrective action, staff received a refresher training on reporting, confidentiality, and ways to help residents report, as well as taking a report. Signed statements of understanding including written main points, to clarify reporting, were signed by all staff after completing this refresher training.</p> <p>Interviews with staff and residents, at the end of the corrective action period, confirmed staff and resident’s knowledge, and lack of confusion, around the reporting and grievance process. NYTC does not have a grievance process for reports of sexual abuse and sexual harassment. Such reports received through this process are immediately removed and fast tracked to be handled as abuse reports. Residents are still able to file a grievance around the process.</p> <p>NYTC provides residents additional material on how to report sexual abuse, sexual harassment, and retaliation in the following manner: a PREA Brochure for residents; PREA posters on units and other areas that residents frequent; PREA reminder cards given to residents and available on units; and the NYTC Student Handbook. All resources are provided in a basic reading level, available in Spanish, in writing, and reviewed verbally. Samples of the above resources are documented in this audit. Residents report having access to all tools necessary to make sexual abuse, sexual harassment, retaliation, or staff neglect reports.</p> <p>PREA Education is provided and mandatory for each resident at intake, within 10 days of intake with a more comprehensive PREA education, and ongoing at unit meetings, groups, and by refresher trainings. In addition, a staff member verbally reviews the NYTC Youth Acknowledgement form that lists the ways to report. Residents sign that reporting information has been reviewed with them and they understand it.</p> <p>NYTC tracks dates residents receive all trainings – this tracking was reviewed and is a part of</p>

audit documentation and is compliant with this standard.

Staff at NYTC also have private ways to report sexual abuse, sexual harassment, retaliation, or staff neglect, of residents. They are mandatory reporters and follow agency policy and procedure in reporting all suspicion, or reports they see or receive. Page 15 of the DCFS PREA policy, the Policy Quick Guide, and Page 16 of the NYTC SOP state these requirements.

Interviews with staff on site, and at the end of the corrective action period, confirmed knowledge of how they can use the online report, report to management, supervisor, and PREA Coordinator. All staff interviewed understood that they are required to report immediately all suspicion, reports received, or knowledge of sexual abuse, sexual harassment, and retaliation from reporting sexual abuse or sexual harassment. Staff confirmed this requirement included report made verbally, anonymously, and from third parties. DCFS PREA policy, page 15 covers how staff can report sexual abuse and sexual harassment and matched staff interviews of knowledge. Staff pointed out that they, as mandatory reporters, are obligated to report immediately.

Interviews with randomly chosen residents confirm dates of PREA education for all residents complied with the standard education requirement at intake, within 10 days of intake, yearly refreshers, and ongoing refresher, discussions, and information available. The training formats included written, video, and staff reading the information-and along with residents initialing understanding of each point. Also confirmed by resident interviews is their clear understanding of ways to report, including internal, online, written, verbal, and outside sources.

Interviews with randomly chosen staff, specialty staff, PREA staff, and management, confirmed understanding of the multiple ways to report, training received and understanding of that training. Staff were able to list all main ways to report, their responsibility to immediately take and report any suspicion or report of sexual abuse, sexual harassment, retaliation, or staff neglect, they receive, see, or suspect.

After review of the NYTC/DCFS PREA policy, NYTC SOP, PREA 101 staff training – including updates to this training during the corrective action period; refresher training on reporting given during the corrective action period, documentation of attendance and understanding; NIC specialized trainings and certificates; grievance forms, outside reporting source 211, Unity note, Training tracking forms for residents and staff; NYTC student handbook, Youth Acknowledgement Form; Resident PREA education Video; 211 MOU; documentation of resident training and curriculum; PREA Brochure, Posters, PREA Quick Books; and PREA reminder cards, and, conducting interviews with random staff and residents, management, and PREA staff, as well as assessing practice during the onsite visit and with phone interviews after the corrective action period; NYTC is assessed compliant with PREA standard 115.351 in policy/procedure, practice, and culture.

115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Nevada DCFS/JJ does not have an administrative procedure for dealing with resident grievances regarding sexual abuse. If a report is received through the grievance process, it is immediately removed and fast tracked to be handled as an abuse report.

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.353.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) on page 9 that requires NYTC to provide residents with access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting or otherwise making accessible mailing addresses and telephone numbers; and enable reasonable and confidential communication between residents and these organizations. In addition, how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP page 9) and National Prison Rape Elimination Act (PREA) standards.</p> <p>NYTC has a flyer posted in each unit with the phone number and address of the Committee Against Domestic Violence (CADV). CADV/Harbor House provides emotional support for victims of sexual abuse or sexual assault. Also provided to residents, in their NYTC student handbook, is the number of the National Sexual Assault Hotline 1-800-656-4673 and CADV phone number 775-738-9454. If at any time a resident wishes to speak to supportive help from an outside agency, they can do so in a confidential manner (page 8 or SOP).</p> <p>Documentation is included in this audit of CADV refusing to sign a MOU with NYTC. In a phone interview with the Director of CADV, she said they would provide crisis services and an advocate for residents who experienced sexual abuse; however, the board would not sign a MOU to that effect. Documentation enclosed of attempts to get a MOU signed and the email declining to sign it.</p> <p>Another right that residents have at NYTC is reasonable access to their attorney and to their parents or legal guardians. All residents interviewed confirmed that they have access to their attorney and parents/guardian. NYTC SOP, on page 8, states that residents will have access to their attorney or other legal representatives and reasonable access to parents or legal guardians. Interviews with random staff and random residents confirms that they have access to attorneys and parents/guardians while at NYTC.</p> <p>In the case of sexual assault/abuse that required a forensic examination, Northeast Nevada Regional Hospital is not a part of the juvenile justice system and works to secure a victim advocate for NYTC residents who experience sexual abuse and are brought to the center. They are a qualified crisis support agency that provides victim services that follow the resident through the investigatory interviews and the forensic medical exam. Phone interview with this agency confirmed this process. CADV is the advocate agency who provides advocates to Northeast Nevada Regional Hospital.</p> <p>NYTC offers medical and mental health evaluations for residents who have been sexually</p>

abused, in any prison or facility at no cost to the victim, regardless if the victim names the perpetrator or not.

NYTC trains staff on their Coordinated Response Procedure, including form A the Juvenile Interview Form, and form B-PREA Initial Response Checklist. The education is provided to staff in PREA 101 and yearly refreshers, as documented by the staff training tracking sheet, and interviews with random staff, mental health and medical staff, PREA staff, management and training staff.

NYTC trains residents on their right to speak to a victim advocate for support, in cases of sexual abuse/assault, in their comprehensive PREA training given to residents within 10 days of intake into the facility.

After review of the NYTC/DCFS PREA policy, NYTC SOP, PREA 101 staff training, Training tracking forms for residents and staff; NYTC student handbook, Youth Acknowledgement Form; Resident PREA education Video; documentation of resident training and curriculum; PREA Brochure, PREA reminder cards, and, conducting interviews with random staff and residents, management, and PREA staff, as well as assessing practice onsite. NYTC is assessed compliant with PREA standard 115.353 in policy/procedure, practice, and culture.

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with standard 115.354.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) on page 13 that establishes a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a resident and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>DCFS provides multiple ways for third-parties to report sexual abuse, sexual harassment, retaliation and/or staff neglect that may have contributed to an incident of sexual abuse of harassment. They include: direct reporting to a staff member; written correspondence to the facility or a staff member; phone contact with the Superintendent or other staff; calling the PREA Coordinator at 888-421-9971, electronically at Http://dcfs.v.gof/programs/JJD/ProgramsOffice/ and calling 2-1-1 for the outside reporting source.</p> <p>DCFS and NYTC provides PREA Brochures to residents, parents/guardians, and staff outlining the ways to report sexual abuse, sexual harassment, retaliation for making a sexual abuse report, and any staff neglect that may have contributed to the sexual abuse incident. In addition, DCFS and NYTC provides “reminder cards” to residents, parents/guardians, and staff with the details of making a third-party report.</p> <p>After review of the NYTC/DCFS PREA policy, NYTC SOP (page 13), PREA 101 staff training and yearly refreshers, Staff Training Tracking form; PREA Brochure, Parent Handbook-page 11-12; PREA reminder cards for staff, youth, and parents; PREA Brochure, and PREA reminder cards; and, conducting interviews with random staff, management, and PREA staff, as well as assessing practice onsite. NYTC is assessed compliant with PREA standard 115.354 in policy/procedure, practice, and culture.</p>

115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.361.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09). Page 5 and 15 requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>DCFS PREA 101 is the staff training for this standard. In addition, it covers mandatory child abuse reporting requirements and laws. Staff training is tracked, and all staff completed PREA 101.</p> <p>Random staff interviews showed strong knowledge and compliance with requirements to report immediately any knowledge, suspicion or information they received regarding incidents of sexual abuse, sexual harassment, retaliation against residents or staff who reported such an incident, and any neglect or violation of responsibilities that may have contributed to an incident or retaliation. PREA 101 includes all training requirements and tracking is completed on the Staff Training Tracking Form to ensure all staff complete this training. Random staff understood their reporting requirements as a mandatory reporter and takes them very seriously in practice.</p> <p>115.361c – In random staff and random resident interviews and review of documentation, there was confusion and lack of compliance around helping residents make confidential sexual abuse, sexual harassment, retaliation, or staff neglect or violation reports. The confusion centered around residents making the reports by phone, in privacy, and with only those who needed to know being informed. In addition, staff were unclear how, or if they needed to gather statements when a report was made by a resident, or what type of information gathering they needed to do.</p> <p>During the corrective action period, staff received a refresher training covering ways youth can report, confidentiality, privacy, and ways to help youth report. Additionally, the training covered a resident’s right to confidentiality, need to know, and leaving the investigation to the investigators. Audit documentation includes the curriculum covered, including statements of understanding by staff trained, and training tracking to ensure all staff participated in the training and understood all aspects of it.</p> <p>After the additional staff training, interviews completed at the end of the corrective action period demonstrated substantial compliance in the following requirements and practices: If a</p>

resident asks to make a 2-1-1 call accompany the youth to a private office in the school or administrative building to make that call privately; if a resident chooses to fill out a grievance, never read the grievance. Only NYTC staff assigned to handle grievances should read it; only gather the information necessary to make the PREA report, do not take written statements or have group written statements completed; Only talk to people in a 'need to know' position if a resident makes a verbal report to staff; the multiple ways residents can report; and methods to assist residents to report privately and confidentially.

At NYTC medical and mental health staff are required to report any allegation of sexual abuse-the same as any other mandatory reporter/staff; however, they also are required to inform residents of their duty to report and the limitations of confidentiality at the initiation of services. Interviews with medical and mental health staff were overwhelmingly 100% compliant with practice of this requirement.

The next standard requirement, for 115.361, is compliant as the facility superintendent promptly reports sexual abuse allegations to law enforcement/DCFS, the residents parents/guardians as appropriate, parole or probation officer, and resident's attorney, within 14 days of receiving the allegation, and this is thoroughly documented.

Finally, all allegations of sexual abuse -including third party and anonymous, are reported to the PREA investigator. The PREA investigators, for DCFS juvenile facilities are the Department of Corrections PREA investigators out of the OIG office. All PREA reports are sent to the OIG's office and the Department of Corrections PREA Investigators conduct PREA administrative investigations. All criminal investigations are conducted by the Elko County Sherriff's Department.

After review of the NYTC/DCFS PREA policy (page 5 and 15), NYTC SOP, PREA 101 staff training, staff refresher training given during corrective action, required annual PREA training, the Staff Training Tracking form; and, conducting interviews with random staff, random residents, management-including NYTC Superintendent, and PREA staff, as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.361 in policy/procedure, practice, and culture.

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.362.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09), that requires NYTC staff to take immediate action to protect the resident, when they learn that they are subject to a substantial risk of imminent sexual abuse, and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>NYTC staff are trained, using the curriculum from PREA 101, and indicating their understanding and knowledge in signed statements of understanding. In addition, all NYTC staff complete the National Institute of Corrections (NIC) PREA training, PREA: Your Role to Responding to Sexual Abuse with a passing score. Both trainings cover immediate action required to protect any resident who is deemed to be at substantial risk of imminent sexual abuse.</p> <p>Interviews of management, random staff, specialty staff, and PREA staff confirmed staff training and knowledge of action necessary, if a resident is in substantial risk of imminent sexual abuse. Protective actions are taken immediately, based on each case and circumstance, to separate alleged offender and protect the resident at risk. The resident at risk for sexual abuse will only be moved when there is no other option to protect that resident.</p> <p>In the last 12 months, no resident has been determined to be at substantial risk for sexual abuse, so there were no cases to review.</p> <p>After review of the NYTC/DCFS PREA policy, NYTC SOP, PREA 101 staff training, NIC training, required annual PREA training, the Staff Training Tracking form; and, conducting interviews with random staff, random residents, management, including NYTC Superintendent, and PREA staff, as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.362 in policy/procedure, practice, and culture.</p>

115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.363.</p> <p>Nevada Youth Training Center has a PREA Standard Operating Procedure (SOP) that requires the NYTC Superintendent, upon receipt of an allegation that a resident was sexually abused while confined to another facility to notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and also notify the appropriate investigative body. The SOP (page 18) describes how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>At NYTC, the notification to the appropriate office or agency is required to occur within 72 hours and in the interview with the superintendent, he said it would most likely happen immediately. This would be documented in Unity. The Superintendent also stated that he would report the allegation to the appropriate investigative body to ensure mandatory reporting was completed and an investigation was completed on the allegation.</p> <p>If NYTC receives an allegation of sexual abuse from another facility or agency and that occurred at NYTC, the allegation will be reported to the appropriate investigative body, as well as the PREA Investigator, and referrals will be documented.</p> <p>Zero allegations of sexual abuse were received from other facilities-that occurred at NYTC, and zero allegations were received by NYTC of sexual abuse that occurred at other facilities.</p> <p>After review of the NYTC SOP, conducting interviews with the NYTC Superintendent and PREA Staff, NYTC is assessed compliant with PREA standard 115.363.</p>

115.364	Staff first responder duties
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1279 360">Nevada Youth Training Center (NYTC) is compliant with this standard 115.364.</p> <p data-bbox="252 416 1481 831">Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) on page 15-16 requiring that upon learning that a resident was sexually abused, the first staff member to respond to the report is required to: separate the alleged victim and abuser; preserve and protect any crime scene for law enforcement; if the abuse occurred within a time frame still allowing for collection of physical evidence, ensure the alleged victim and the alleged perpetrator does not wash, brush teeth, change clothing, urinate, defecate, drink or eat, and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p data-bbox="252 887 1391 958">There have been zero allegations that a resident was sexually abused at Nevada Youth Training Center.</p> <p data-bbox="252 969 1481 1041">NYTC staff are all security staff and first responders and have the same requirement as above for responding to sexual abuse.</p> <p data-bbox="252 1097 1481 1346">All NYTC staff are trained as first responders in the PREA 101 training and the NIC, PREA: Your Role to responding to Sexual Abuse in Confinement. All staff are also required to have annual PREA refresher trainings. All trainings are tracked on the Staff Training Tracking Form, and statements of understanding or tests of knowledge are required on all staff trainings. In addition, all staff are trained on the DCFS PREA Policy, the NYTC SOP, Coordinated Response to an allegation of sexual abuse, required response documents, form A and B.</p> <p data-bbox="252 1402 1481 1686">Interviews with random staff, management, and PREA Staff confirm the knowledge and understanding of the actions they need to take when an allegation of sexual abuse is made. All staff clearly articulated the need to separate the alleged victim and the alleged perpetrator, preserve and protect any crime scene for law enforcement, if the abuse occurred within a time frame still allowing for collection of physical evidence, ensure the alleged victim and the alleged perpetrator does not wash, brush teeth, change clothing, urinate, defecate, drink or eat.</p> <p data-bbox="252 1742 1455 1946">After review of the NYTC/DCFS PREA policy, NYTC SOP, PREA 101 staff training, NIC training, required annual PREA training, the Staff Training Tracking form; and, conducting interviews with random staff, management, including NYTC Superintendent, and PREA staff, as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.364.</p>

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.365.</p> <p>Nevada Youth Training Center has an individualized, facility PREA Coordinated Response Procedure listing required actions to be taken in response to an incident of sexual abuse by staff first responders, medical and mental health practitioners, investigators, and facility leadership, and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>The NYTC Coordinated Response Procedure includes duties for the First Responder, Assistant Head Group Supervisor, PREA Compliance Manager, Superintendent, PREA Investigator, Medical Staff, and Mental Health Staff. This plan includes a PREA Response Matrix to quickly assess the steps needed and ensure all staff perform their required duties to respond to an allegation of sexual abuse.</p> <p>All required actions are included in the NYTC coordinated Response Procedure and interviews with random staff, specialty staff, management, and PREA staff confirm knowledge, understanding, ability to recite what action to take in each circumstance-including documentation. PREA training for the NYTC Coordinated Response Procedure is included in PREA 101, NIC training Your Role to Responding to Sexual Abuse, and annual refresher training.</p> <p>After review of the NYTC Coordinated Response Procedure, PREA 101 staff training, NIC training, required annual PREA training, the Staff Training Tracking form; and, conducting interviews with random staff, management, including NYTC Superintendent, Mental Health and Medical staff, PREA Investigator and PREA staff, as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.365.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf enters into or renews any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p>

115.367	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.367.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) on pages 5-6 to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff and has designated the NYTC PREA Compliance Manager with monitoring retaliation and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>NYTC complies with this standard by designating a PREA Compliance Manager as the retaliation monitor, and during an interview declared that she has sufficient time and authority to complete her assigned duties of monitoring for possible retaliation. Pages 15-16 of the NYTC Standard Operating Procedures sets out guidelines for protection from retaliation for reporting sexual abuse and sexual harassment.</p> <p>The procedure prohibits staff and residents from retaliating against other staff and residents for reporting allegations of sexual abuse or sexual harassment. In addition, this procedure describes actions that may be taken to guard against retaliation, as per this standard. These actions include separation of residents by housing change, separation during activities or educational programming, and increased supervision; or, if the resident is being retaliated against, provide mental health counseling and emotional support, and monitoring for 90+ days and additional steps to protect the resident. For staff/volunteer/contractor, administrative leave, reassignment, disciplinary action; or, if a staff is being retaliated against, referral to employee assistance service program, monitor for up to 90+ days, and additional steps to protect the staff.</p> <p>During the monitoring period, disciplinary reports, incident reports, daily grades, housing changes, and program changes will be monitored for sign of retaliation against resident; and, for staff, review of negative staff evaluations and reassignments will be monitored.</p> <p>Zero incidents of retaliation were reported in the last 12+ months</p> <p>Staff training on retaliation for reporting sexual abuse or sexual harassment is completed using PREA 101 and the NIC online training - both which ensure the seriousness and consequences of retaliating behavior and actions to monitor and support those being retaliated against. All staff have completed these trainings as evidenced by the Staff Training Tracking Log and statements of understanding and certificate of completion by testing.</p>

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with standard 115.368.</p> <p>Nevada Youth Training Center has Standard Operating Procedures (SOP) on page 11 that states residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only after an alternative means of keeping all residents safe can be arranged, and how to fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>The NYTC SOP states that residents shall only be isolated from the group if the resident is a danger to others, or for protection from others. If for the protection from others, and all other options have been exhausted, the removal from the group, every 7 days the reason for removal will be reevaluated to determine if the threat still exists and if there is a better solution to the separation. The resident will have access to exercise, educational programming, daily visits from medical or mental health, work opportunities and any other program that NYTC offers, to the extent possible.</p> <p>Any room confinement of more than 1 hour for safety reasons shall have a written report in UNITY explaining the reasons for the confinement, reason why no alternative means of separation was used and an expected time of terminating the isolation restriction. The Deputy Administrator and Superintendent must be notified when this occurs.</p> <p>Zero residents have been placed in isolation who have suffered sexual abuse, for their protection.</p> <p>Interviews with management, medical and mental health staff, random staff, random residents, specialty staff, and PREA staff, confirmed that residents are not isolated when victims of sexual abuse. If a movement needs to be made for safety reasons, it is not to isolation.</p> <p>During corrective action, staff received a refresher training about resident movement decisions when sexual abuse is alleged, and alleged victim and alleged perpetrator are both on the same unit. Training included direction that the alleged perpetrator is to be moved, if necessary, to minimize as much as possible the trauma to the victim. Only when all other options are exhausted is the alleged victim to be moved, approval must be made by the Assistant Head Group Supervisor or Shift Supervisor. The reasoning will be documented by all staff involved in this decision. Curriculum is included in this audit, as are signed staff statements of understanding.</p> <p>After review of the NYTC SOP, PREA 101 staff training, NIC training, refresher training completed during the corrective action period, the Staff Training Tracking form; and conducting interviews with random staff, random residents, management, Mental Health and</p>

Medical staff, and PREA staff, as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.368.

115.371 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Nevada Youth Training Center (NYTC) is compliant with this standard 115.371.

Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 18-20, stating all allegations with a criminal element, including sexual abuse allegations, will immediately be reported to the Elko Police Department or Elko County Sheriff’s Department for investigation. Qualified PREA Investigators from the DCFS Parole unit or Department of Corrections (DOC) Office of the Inspector general will conduct all administrative investigations. This will fulfill their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.

During the corrective action period: Administrative PREA investigations, regarding sexual abuse or sexual harassment, had previously been conducted by upper-level staff within NYTC; and, after the DOJ clarifications about the training and background the PREA Investigator must bring to the position, this process was changed. PREA administrative investigations were assigned to qualified investigators from the DCFS Parole unit or the Department of Corrections (DOC) Office of the Inspector General. Investigators from these departments bring experience and prior investigator training, as well as specialized training on conducting PREA investigations in confinement. DCFS and NYTC worked tirelessly to meet this standard and found a solution that can only enhance the reporting, response, and investigations conducted by these well qualified investigators, who are stationed outside any DCFS juvenile facility. Additionally, DCFS is making funding request for a dedicated PREA Investigator position, with experience in criminal investigation, and specialized training in conducting investigations in juvenile confinement.

Interviews with investigators, during the site visit and again after corrective action, confirmed that the DCFS Parole Unit, and now the Department of Corrections Office of the Inspector General PREA Investigators are conducting any PREA administrative investigation Training included in this audit confirms these officers are trained peace officers and have additional training in conducting sexual abuse investigations in confinement. Interviews and review of investigations confirmed that the investigations are being conducted promptly, thoroughly, and objectively—including third party and anonymous reports.

The Elko County Sheriff’s Office of Elko Police Department conduct all criminal investigations, including gathering and preserving direct and circumstantial evidence, including any available physical and DNA evidence and any electronic monitoring data, interviews, and review of prior complaints and reports. NYTC and the Elko County Sheriff’s Office maintain a MOU for criminal investigative services. It is included in audit documentation.

Page 20 of the DCFS PREA policy (300.09.3.317) states that the facility will not terminate an investigation of sexual abuse or sexual harassment solely because the source of the allegation recants, leaves the facility, or an employee vacates or is terminated from his or her

position. Interviews with investigators confirm that they complete all investigation to completion. Investigator interviews and documentation of investigations confirm the process of completing all interviews to completion. In addition, both Law enforcement investigators, as well as PREA administrative investigators assesses the credibility of an alleged victim, suspect, or witness on an individual basis. In addition, no polygraphs are required as a condition for proceeding with an investigation. This is confirmed by investigator interviews and review of investigations.

Included in documentation of this audit are PREA administrative investigations that include assessment to determine whether staff actions or failures to act contributed to the abuse and include written reports with a description of evidence, credibility assessments and investigative facts and findings. Investigator interviews and review of investigations were consistent with this standards requirement.

The MOU with the Sheriff's department contains the requirement that criminal investigations are documented in a written report, covering all requirements and given to the facility when complete.

Zero criminal investigations or allegations of sexual abuse have been made, at NYTC, in the last 12 months.

DCFS PREA Policy, page 22-23, requires substantiated allegations that appear to be criminal are referred for prosecution. Zero allegations of sexual abuse were received, investigated or prosecuted in the last 12 months at NYTC.

NYTC retains all PREA written reports of investigations for the required standard timeframe (PREA policy page 21)

After review of the DCFS PREA policy, investigator training, policy before and after changes made during corrective action period, investigations, the Staff Training Tracking form; and, conducting interviews with investigators, management, and PREA staff---as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.371.

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.372.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 20, stating DCFS will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated. This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>After review of the DCFS PREA policy, and PREA administrative investigations, and conducting interviews with investigators, management, and PREA staff--as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.372.</p>

115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.373.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 20, states that following the investigation into a resident's allegation of sexual abuse, the agency shall inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>Included in documentation of this audit are notifications to residents on allegations of sexual harassment. Zero allegations of sexual abuse were received in the last 12 months.</p> <p>A MOU with the Elko County Sherriff's Department states that they will conduct all sexual abuse criminal investigations and when complete, give the completed report to NYTC so they can conduct an administrative investigation.</p> <p>Zero allegations of sexual abuse or investigations were received or investigated in the last 12 months</p> <p>Page 19 of NYTC Standard Operating Procedures (SOP) required notifications of the resident that are required by the PREA standard 115.373. Included in this audit is the form used to document notification of the resident. There have been no allegations that a staff member committed sexual abuse at NYTC in the last 12-month period of this audit.</p> <p>Page 20 of the DCFS PREA Policy contains all required notification requirements for residents who have been sexually abused by another resident. Included in this audit is the notification form that will be used for such notification. All required notification areas are included on this form. Included are forms used for notifications in three allegations of sexual harassment. Zero reports of sexual abuse of one resident by another were received in the last 12 months.</p>

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.376.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 22 and a NYTC SOP, page4, that states Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. It also states that termination is the presumptive discipline for staff who have engaged in sexual abuse. In addition, Nevada, chapter 284 of Nevada Revised Statutes also contains this requirement. In addition, PREA policy, page 22, states that violation of the agency sexual abuse or sexual harassment policies or resignations by staff who would have been terminated, if not for their resignation, are reported to law enforcement, and to relevant licensing bodies. This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>Zero staff have violated the agency sexual abuse or harassment policies in the last 12 months.</p> <p>After review of the DCFS PREA policy, NYTC SOP, PREA administrative investigations, and, conducting interviews with management, investigators, and PREA staff---as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.376.</p>

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.377.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 23, states that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies and to relevant licensing bodies. The NYTC SOP, page 5,7,16,20, contains the guidelines for appropriate remedial measures and considerations whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards.</p> <p>Zero allegations received, at NYTC, of contractors or volunteers engaging in sexual abuse at NYTC</p> <p>After review of the DCFS PREA policy, NYTC SOP, PREA administrative investigations, and, conducting interviews with management, investigators, and PREA staff---as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.377.</p>

115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.378.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 22, states that a resident may be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse following a criminal finding of guilt for resident on resident sexual abuse. In the NYTC SOP, complies with this standard requirement that a disciplinary sanction for resident-on-resident sexual abuse results in the isolation of a resident, this policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. This procedure also required daily visits from mental health or medical staff, and access to other programs and work opportunities, to the extent possible-if isolated. This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) standards. Interviews with management, PREA staff, and superintendent, confirm that any disciplinary sanctions would be commiserate with the nature and circumstances for the abuse, resident's prior disciplinary history, and sanctions imposed for similar offences, and to the extent possible, the resident would have access to programs, and work opportunities. Daily visits by mental health and/or medical staff would be mandatory, and large muscle exercise, educational programming/special education, would occur. Also, they would always consider if mental disabilities and/or mental illness contributed to the behavior.</p> <p>Page 20 of the NYTC SOP states that at a minimum, resident will be referred to the facility mental health counselor for a risk assessment and possible counseling. NYTC uses a rehabilitate approach to behaviors in all cases and access to general programming or education is never conditional on the resident participating in such interventions. Mental health staff interviews confirm that therapy is offered to assist youth in a rehabilitate approach to addressing underlying reasons or motivations for any abuse in the facility.</p> <p>Page 22 of the DCFS PREA policy, states that DCFS disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such conduct. There were no allegations of staff and youth sexual conduct.</p> <p>Page 23 of the DCFS PREA Policy prohibits disciplinary actions for a report of sexual abuse made in good faith.</p> <p>Page 5 of the DCFS PREA Policy prohibits all sexual activity between residents and if the agency disciplines residents for such activity, the activity is only deemed sexual abuse if it determines that the activity is coerced.</p> <p>Zero allegations of resident-on-resident sexual abuse in the last 12 months, and zero residents were isolated.</p> <p>After review of the DCFS PREA policy, NYTC SOP, PREA administrative investigations, and, conducting interviews with management, random staff, random residents, and PREA staff---as well as assessing practice onsite, NYTC is assessed compliant with PREA standard 115.378.</p>

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.381.</p> <p>Nevada Division of Child and Family Services/Juvenile Justice Services (DCFS/JJ) has a PREA Policy (DCFS/JJ 300.09) Page 14, states “youth who disclose prior sexual abuse or victimization during intake or screening must be referred for a further medical/mental health screening within 72 hours of the disclosure and the allegation and services provided must be tracked by the PREA Compliance Manager. The medical/mental health follow-up will take place within 14 days of the disclosure.” This policy complies with the requirements of this standard.</p> <p>Included in documentation, interviews and site observations reviewed for this audit is:</p> <p>Residents are given the PADDI to determine residents score for dangerous to others or child abuse victim. (samples of reports on residents reviewed are included in this audit). Included in this paperwork is date PADDI was administered, date LOCI-2R was given (level of care index), DSM score, including child abuse or neglect, and, included that resident was counseled.</p> <p>On documentation reports, of youth taking the PADDI and LOCI-2R, some results include determination that resident was a suspected Victim of child abuse, suspected victim and confirmed perpetrator, and refer to the results of the MAYSI-2. It also includes if resident was referred and/or completed Juvenile Sex Offender classes.</p> <p>Unity case notes: samples of case notes entered into Unity for residents who were perpetrators and follow-up classes/treatment; or, residents who were victims of sexual abuse or at high risk to become victims and the follow-up mental health services.</p> <p>NYTC SOP: page 11 section h includes language that a resident who has experienced prior sexual abuse victimization will be referred for a medical/mental health practitioner within 14 days of the intake screening process</p> <p>NYTC SOP: page 11, section I includes language that a resident who has previously perpetrated abuse will be referred for a medical/mental health screening within 72 hours and offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening process.</p> <p>NYTC SOP: Page 11, section j includes language that if screening process indicates that a resident is a resident on resident sexual abuser, a mental health evaluation will be completed within 60 days of confinement, and when a mental health practitioner deemed such treatment is needed. Additionally, the facility will offer mental health services.</p> <p>NYTC PREA Youth Education and Risk Assessment Tracking form: tracks every resident that comes into the facility, resident risk assessment date, date of competition (within 72 hours of intake), if they reported previous sexual abuse or perpetration (also from court records), If</p>

referral was made to medical or mental health follow-up (within 72 hours of report), if medical/mental health referral was followed-up on within 14 days, and within 60 days a mental health evaluation was completed for residents who were perpetrators.

NYTC SOP: page 10 and 12, section 1 uses language that includes the prohibition of disseminating resident information relating to the intake screening and follow-up services to ensure that sensitive information is not unnecessarily exposed. This includes informed consent to disseminate information about prior victimization, unless under the age of 18, without permission from the resident. On page 10 of the SOP, language used includes risk information shall only be shared to ensure the most appropriate and safe placements are made. Finally, page 10 states that the residents will be assessed periodically throughout their stay, at the direction of mental health or medical staff, and tracked by the PREA Compliance Manager.

Interviews with medical and mental health professionals confirm the practice of administering risk assessments to all youth at intake, referring for medical or mental health follow-up within the required standard requirements and timelines. Unity notes, assessment result reports, and tracking forms document the practice of this required standard and that such information is kept confidential and protected.

This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) Standards.

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.382.</p> <p>Nevada Youth Training Center (NYTC) Standard Operating Procedures (SOP), on page 8-9, states that NYTC shall offer all youth who experience sexual abuse access to forensic medical examinations, without financial cost, where evidentiarily or medically appropriate. The victim shall receive immediate unimpeded access to emergency medical treatment and crisis intervention services</p> <p>Interviews indicated that the services will be provided by Northeastern Nevada Regional Hospital and will be determined by the emergency mental health provider or medical practitioner. In addition, the cost will be assumed by NYTC, whether the victim cooperates or not. All pertinent information will be documented in UNITY, including examination by a SAFE or SANE. Northeastern Nevada Regional Hospital will offer information about emergency contraceptive and sexually transmitted infections where medically necessary.</p> <p>Medical staff interviews were consistent with the process and training to ensure victims were transported to Northeastern Regional Hospital, seen by SAFE or SANE professional staff--if determined medically necessary; maintain all records and notes about this process in UNITY and in medical and mental health records at the facility; and, be at no cost to the resident.</p> <p>Interview with SANE nurse at Northeastern confirmed the availability of SAFE/SANE staff to conduct forensic exams, ensure victims are given information about emergency contraceptives and sexually transmitted infections, and provide services as determined by medical staff. In addition, Northeastern Nevada Regional Hospital contacts advocates and insures they are at the hospital to assist the victim through the process.</p> <p>Random staff, specialty staff, medical and mental health staff interviews, without exception, confirmed the process to notify medical and mental health staff immediately upon any sexual abuse incidents.</p> <p>No residents reported sexual abuse at NYTC.</p> <p>This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) Standards.</p>

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.383.</p> <p>Nevada Youth Training Center (NYTC) Standard Operating Procedures (SOP), on page 9, states that NYTC offers medical and mental health evaluations for residents who have been sexually abused or harassed in any prison or lockup facility; Also, any follow up services, treatment plans, or referral for continued care will be encouraged upon release or transfer to other facilities; Page 8 continues, all victims and perpetrators will be given a mental health evaluation within 72 hours of the allegation. Page 9 states that sexually transmitted disease tests will be offered to all residents of sexual abuse, as medically appropriate; and, page 9c states all services will be without cost to the resident.</p> <p>Medical and mental health interviews confirm that NYTC offers follow-up medical and mental health evaluations for residents who have been sexually abused or harassed, as well as Nevada Northeastern Regional Hospital offering testing for sexually transmitted diseases. These incidents and follow-ups are tracked on the Youth tracking form and documented in UNITY and kept with mental health and medical records as confidential files. Also interviews confirmed that mental health evaluations are completed on all known abusers within 60 days of learning of such abuse history and treatment when deemed appropriate by mental health practitioners.</p> <p>Records and tracking forms were reviewed and confirmed services offered within the 60-day timeframe required. Documentation in UNITY and mental health records confirm this.</p> <p>NYTC SOP states that a mental health evaluation of all known resident-on resident abusers will be conducted within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>This information is documented on the youth tracking form to ensure all timeframes are met and also documented in UNITY and in mental health records that are kept confidential.</p> <p>This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA) Standards.</p>

115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Youth Training Center (NYTC) is compliant with this standard 115.386.</p> <p>Nevada Youth Training Center (NYTC) Standard Operating Procedures (SOP), on page 19, states that once the Nevada Youth Training Center has completed an administrative investigation, the Incident Review Team will meet within 30 days. The Incident Review Team will meet to determine whether staffing levels contributed to the incident; if policy or procedural changes are needed; if any individual or group dynamics were motivating factors; if physical barriers contributed; or if technology needs to be augmented or deployed. The team will also make recommendations. This review will be documented on the PREA Incident Review Team form and reviewed and approved by the Superintendent.</p> <p>Included Review team forms comply with the requirements of this standard by completing within 30 days of the end of the investigation, looking at staffing levels to see if they contributed to the incident, policy or procedure changes needed, any other motivating factor, physical barriers, technology needs, and recommendations, as well as approval by the superintendent.</p> <p>The documentation includes review of: investigation report, juvenile interviews, grievance form, statements, UNITY notes, notification of investigation finding to resident, monitoring retaliation and tracking, and review of policy/practice; motivation by race, ethnicity, gender identity, LGBTI identification status or perceived status, gang affiliation, or group dynamics; physical barriers, monitoring technology, staffing levels, and team recommendations.</p> <p>All review documentation was completed on sexual harassment founded or unable to determine reports. There were no founded or unable to determine sexual abuse reports at NYTC. All reviews were conducted within 30 days of the conclusion of the administrative investigation conclusion.</p> <p>The Incident review team consisted of upper level management officials including the PREA Compliance Manager, and review of all relevant documentation of the incident. The included reports are on incidents of sexual harassment and include: investigation report, juvenile interviews, grievance form, statements, UNITY notes, notification of investigation finding to resident, monitoring retaliation and tracking, and review of policy/practice; motivation by race, ethnicity, gender identity, LGBTI identification status or perceived status, gang affiliation, or group dynamics; physical barriers, monitoring technology, staffing levels, and team recommendations.</p> <p>Incident reports are part of the audit documentation and are compliant with the recommendations of this standard.</p> <p>This fulfills their responsibilities under the Nevada DCFS sexual abuse and sexual harassment prevention, detection, reporting, and response policies and Nevada Youth Training Center Standard Operating Procedures (SOP) and National Prison Rape Elimination Act (PREA)</p>

	Standards.
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115.387	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.388	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>This auditor was given access to all areas of the facility. All requested documents and documentation of compliance was submitted during the audit or during the corrective action period. This auditor was permitted to conduct all interviews in private and had access to all residents, staff, and collaterals.</p> <p>This auditor was given a facility tour covering all areas of the facility. The auditor’s announcement and information sheet was posted more than 6 weeks before the on-site audit and residents were given the opportunity to access this auditor if they chose. Documentation of posting was received, and auditor documented the posting during the tour. Residents confirmed they were told they had the right to send information or call the auditor if they chose. No resident chose to contact this auditor.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings

115.311 (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

115.311 (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

115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.)	yes

115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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 residents OR the response to 115.312(a)-1 is "NO".)	yes

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan	yes

	that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and	yes

	placement of supervisory staff?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes

115.313 (d)	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: Prevailing staffing patterns?	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

115.313 (e)	Supervision and monitoring	
	Has the facility 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? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility 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? (N/A for non-secure facilities)	yes

115.315 (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

115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes

115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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 a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes

115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, 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

115.315 (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 residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents 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: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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 residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents 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 residents with disabilities including residents who: Who are blind or have low vision?	yes

115.316 (b)	Residents with disabilities and residents 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 residents 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

115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes

115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.317 (b)	Hiring and promotion decisions	
	Does the agency consider 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 residents?	yes

115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, 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

115.317 (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 residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes

115.317 (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 residents or have in place a system for otherwise capturing such information for current employees?	yes

115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents 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 residents 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

115.317 (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

115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, 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

115.318 (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 residents 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

115.318 (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 residents 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

115.321 (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

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

115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience 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

115.321 (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?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.321 (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

115.321 (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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is not responsible for investigating allegations of sexual abuse.)	no

115.321 (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? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321 (d) above.)	yes

115.322 (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

115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy 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

115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes

115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents 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 residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes

115.331 (c)	Employee training	
	Have all current employees who may have contact with residents 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

115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents 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 residents)?	yes

115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes

115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes

115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes

115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes

115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes

115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.321(a).)	yes

115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(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 115.321(a).)	yes

115.334 (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 115.321(a).)	yes

115.335 (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?	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?	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 juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.335 (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.)	yes

115.335 (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?	yes

115.335 (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 §115.331?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332?	yes

115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes

115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes

115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes

115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes

115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes

115.342 (d) Placement of residents		
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes

115.342 (e) Placement of residents		
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes

115.342 (f) Placement of residents		
	Are each transgender or intersex resident'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

115.342 (g) Placement of residents		
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.342 (h) Placement of residents		
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes

115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes

115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes

115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.352 (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 resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na

115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na

115.352 (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 residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	na
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	na
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	na

115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na

115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	no
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes

115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, 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

115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents 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

115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes

115.354 (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 a resident?	yes

115.361 (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 they receive 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 they receive regarding retaliation against residents 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 they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes

115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited 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

115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes

115.361 (f)	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

115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes

115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident 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
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes

115.363 (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

115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.363 (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

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident 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 a resident 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 a resident 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 a resident 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

115.364 (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

115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.366 (a)	Preservation of ability to protect residents 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 limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no

115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.367 (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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident 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: Resident 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: Resident 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

115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes

115.367 (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

115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes

115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes

115.371 (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 involving juvenile victims as required by 115.334?	yes

115.371 (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

115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes

115.371 (e)	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

115.371 (f)	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 resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.371 (g)	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

115.371 (h)	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

115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes

115.371 (k)	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 facility or agency does not provide a basis for terminating an investigation?	yes

115.371 (m)	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 115.321(a).)	yes

115.372 (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

115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident'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 resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.373 (c)	Reporting to residents	
	Following a resident'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 posted within the resident's unit?	yes
	Following a resident'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 a resident'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 a resident'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

115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes

115.376 (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

115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.376 (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

115.376 (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

115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	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

115.377 (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 residents?	yes

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes

115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes

115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes

115.378 (d)	Interventions and disciplinary sanctions for residents	
	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 offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes

115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes

115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes

115.381 (c)	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

115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes

115.382 (a)	Access to emergency medical and mental health services	
	Do resident 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

115.382 (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 staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.382 (c)	Access to emergency medical and mental health services	
	Are resident 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

115.382 (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

115.383 (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 residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.383 (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

115.383 (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

115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(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.)	na

115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.383 (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

115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes

115.386 (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

115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.386 (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

115.386 (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 §§ 115.386(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	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, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes