

# 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**

<b>Facility name:</b>	Nevada Youth Training Center
<b>Facility physical address:</b>	100 Youth Center Road, Elko, Nevada - 89801
<b>Facility Phone</b>	775-738-7182
<b>Facility mailing address:</b>	751 Ryland Street, Reno, Nevada - 89502
<b>The facility is:</b>	<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
<b>Facility Type:</b>	<input type="radio"/> Detention <input checked="" type="radio"/> Correction <input type="radio"/> Intake <input type="radio"/> Other <input type="text"/>

**Primary Contact**

<b>Name:</b>	Jennifer Simeo	<b>Title:</b>	PREA Coordinator
<b>Email Address:</b>	jsimeo@dcfs.nv.gov	<b>Telephone Number:</b>	775-687-2276

**Warden/Superintendent**

<b>Name:</b>	Greg Thornton	<b>Title:</b>	Superintendent
<b>Email Address:</b>	gthornton@dcfs.nv.gov	<b>Telephone Number:</b>	775-738-7182

**Facility PREA Compliance Manager**

<b>Name:</b>		<b>Email Address:</b>	
<b>Name:</b>	Henri Willer	<b>Email Address:</b>	hwiller@dcfs.nv.gov

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

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

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

<b>Agency Chief Executive Officer Information:</b>			
<b>Name:</b>		<b>Title:</b>	
<b>Email Address:</b>		<b>Telephone Number:</b>	

**Agency-Wide PREA Coordinator Information**

<b>Name:</b>	Jennifer Simeo	<b>Email Address:</b>	jsimeo@dcfs.nv.gov
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## 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.

<b>Number of standards exceeded:</b>	2
<b>Number of standards met:</b>	36
<b>Number of standards not met:</b>	0
<b>Not audited at the facility level:</b> 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.