

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: March 5, 2017

Auditor Information			
Auditor name: Robert Lanier			
Address: 1825 Donald James Rd, Blackshear, GA 31516			
Email: rob@diversifiedcorrectionalservices.com			
Telephone number: 912-281-1525			
Date of facility visit: February 23-24, 2017			
Facility Information			
Facility name: Arizona State Prison-Marana			
Facility physical address: 12610 West Silverbell Road, Marana, Arizona 85653			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: 520/682-2077			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Warden Jeremy Casey			
Number of staff assigned to the facility in the last 12 months: 119			
Designed facility capacity: 506			
Current population of facility: 487			
Facility security levels/inmate custody levels: Minimum			
Age range of the population: 18-73			
Name of PREA Compliance Manager: Stormy Genzman		Title: Correctional Programs Manager	
Email address: stormy.genzman@mtctrains.com		Telephone number: 520/616-4585	
Agency Information			
Name of agency: Management & Training Corporation			
Governing authority or parent agency: <i>(if applicable)</i> Click here to enter text.			
Physical address: 500 North Marketplace Drive, Centerville, Utah 84014			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: 801/693-2600			
Agency Chief Executive Officer			
Name: Scott Marquardt		Title: President / CEO	
Email address: scott.marquardt@mtctrains.com		Telephone number: 801-693-2800	
Agency-Wide PREA Coordinator			
Name: Mark Lee		Title: Director, Corrections / Corporate PREA Coordinator	
Email address: mark.lee@mtctrains.com		Telephone number: 801-693-2864	

AUDIT FINDINGS

NARRATIVE

The PREA Audit of the Arizona State Prison-Marana, a facility operated by the Management and Training Corporation (MTC), was conducted February 23-24, 2017. It is the mission of the Management Training Corporation (MTC) to “Be a leader by: implementation of our plan to achieve high performance standards and goals; Maintaining a foundation based on integrity, accountability and excellence; Providing long-term growth and stability while ensuring fiscal responsibility; Creating opportunities through a positive environment for personal growth and development; Empowering employees to implement innovative ideas for continuous improvement and Building esteem and pride by celebrating our diversity and accomplishments.”

The mission of the Arizona State Prison (ASP)- Marana facility is to “House Arizona State inmates in a safe, humane, cost-efficient and appropriately secure institution and to provide necessary and appropriate medical, dental and mental health services to inmates by professional staff and to provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.”

The Notice of PREA Audit was posted six weeks prior to the on-site PREA Audit. There was no correspondence from either staff, inmates, volunteers, contractors or visitors as a result of that posting. Prior to the on-site PREA Audit, the MTC Assistant PREA Coordinator facilitated a teleconference between the Auditor, Warden and PREA Compliance Manager. In addition to introductions, logistics for the on-site audit were discussed. Two weeks prior to the on-site audit the auditor received and reviewed the external “flash drive” containing MTC Policies, Arizona Department of Corrections Policies and additional documentation to support the facility’s compliance with the standards. This information was printed out and reviewed. Additional documentation was requested and provided during the on-site audit. The request included documentation of applicants responding to the PREA related questions, Professional Reference Checks and background checks for newly hired staff, staff who were promoted and five year checks. In addition, background clearance information for a sample of volunteers and contractors was requested. The information provided on the flash drive was well organized and efficiently arranged with applicable MTC Policies and Arizona Department of Corrections Department Orders. The information provided was exceptional and enabled the auditor to understand the agency and company policies and practices prior to conducting the on-site audit. Too, memos from the Warden provided clarification in addressing virtually every standard and substandard. The PREA Compliance Manager and Warden maintained excellent communications with the auditor prior to the on-site audit.

Also, prior to the on-site audit, the MTC Assistant PREA Coordinator arranged a teleconference with the MTC Senior Vice President and the MTC PREA Coordinator. It was apparent from the interviews with these company officials that this company takes the sexual safety of inmates in their facilities seriously. These individuals had an exceptional grasp of PREA and again, the commitment of MTC to PREA was more than evident.

An entrance meeting was held on February 23, 2017, where introductions were made. In addition to the Warden and PREA Auditor, the following were in attendance: the MTC Assistant PREA Coordinator, ASP-Marana PREA Compliance Manager, the Arizona Department of Corrections PREA Coordinator, the facility Captain and the Health Services Administrator. Following introductions, the Auditor briefly discussed the PREA audit process.

Following the entrance conference, the auditor toured the facility led by the Warden and accompanied by the PREA Compliance Manager, Assistant MTC PREA Coordinator, and others. Areas visited included the housing areas, program areas, medical, intake, food service, laundry, administrative and recreational areas. The facility was observed to be extremely clean, well-maintained and orderly. Floors were highly shined. Dorms were clean and orderly. Inmates were observed engaged with staff and under staff supervision. Staff were supervising inmates in the laundry and food service areas. Blind spots were minimal. Cameras were observed strategically located throughout the facility. Cameras were installed in each of the pods. One area was determined to need a mirror to mitigate the blind spot and several solid doors out of view of a camera needed signs restricting access. The mirror was installed and signs were posted prior to the end of the first day. Photos were provided to document that the requested corrective action was completed. PREA Posters and phones were observed throughout the facility. Showers and restrooms provided privacy for inmates showering and using the restroom. There were no cameras in these areas.

At the conclusion of the on-site PREA audit, an exit briefing was conducted with the Warden, Arizona Department of Corrections PREA Coordinator, MTC Assistant PREA Coordinator, Facility PREA Compliance Manager, Chief of Security and Health Services Administrator.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Arizona State Prison-Marana is a minimum-security prison operated by the Management & Training Corporation (MTC). The facility confines convicted male inmates from the Arizona Department of Corrections. The institution is located on a 25-acre site near the town of Marana, Arizona, and approximately 25 miles north-west of Tucson, Arizona. MCCF became operational in 1994 and was the first private prison to be awarded a contract by the State of Arizona Department of Corrections (ADC).

The inmate housing consists of dormitory style housing units and 4 short term holding cells. Unit I houses four (4) Pods while Unit II houses six (6) pods. Although the dorms are open bay style, the bed areas have half walls to provide more privacy to the inmates living in the pod.

Each dorm unit provides basic furnishings, shower facilities, and common TV areas. All showers and commodes at ASP-Marana have panels, shower curtains and screens to enhance privacy.

The Correctional Officers provide security supervision.

The security perimeter consists of 12' high woven wire fences with razor ribbon wire at the top. A Control Center monitors all traffic entering and exiting the facility. Numerous cameras control the perimeter and are placed throughout the facility to monitor the security and to open doors. The facility has two entry points, the front staff and visitor entrance and the sally port vehicle gate for vehicles.

The main structures provide spaces for administration, control rooms, visiting, food service, academic education, substance abuse education, medical, commissary, maintenance, laundry, library, and staff offices.

The Educational Programs include Adult Basic Education (ABE), General Educational Development (GED), correspondence courses, and English as a Second Language. Vocational programs include Open Office and NCCER. The educational program has been accredited by the Correctional Educational Association. In year 2016, the program reported very impressive certificate counts. There were a total of 2,617 certificates granted. These included:

Education- ABE 184, ESL 36, GED 69.

Life Skills- Financial Peace University 145, Inside Out Dads 274.

Life Skills Education 1,721.

Substance Abuse Treatment - 396.

Vocational - Open Office 113, NCCER 115.

The facility provides 26 different self-improvement programs for the inmate population. Among the programs is the Substance Abuse Program which provides treatment for adult male inmates who have demonstrated a need for substance or alcohol abuse programming.

Work activity is a very important component of the Marana's program. It is designed to teach inmates employability skills and help them become accustomed to a work ethic. These programs include inmate work opportunities both inside the prison and outside of the prison on work details. Several outside work crews support the Towns of Marana and Oro Valley Arizona, in areas such as landscaping, water department maintenance, the Northwest Regional Airport and AZ highway crews. The facility also has agreements with the AZ National Guard, AZ Correctional Industries and Eastern Style Builders to provide inmate work crews.

There are also recreational activities, religious, and social services available. ASP-Marana has been accredited by the American Correctional Association.

SUMMARY OF AUDIT FINDINGS

A PREA Audit of the Arizona State Prison-Marana Facility was conducted February 23, 2017 – February 24, 2017. The auditor’s methodology consisted of the following: Review of information contained on the external flash drive provided by the facility; reviewing additional documentation on site; observations made during the tour of the facility and interviewing twelve (12) specialized staff and fourteen (14) randomly selected staff. In addition to these, the auditor interviewed the following: two (2) Contractors, the Psychologist, an Arizona Department of Corrections Criminal Investigation Unit Investigator and an Arizona Department of Corrections Contract Manager. Informal discussions were conducted with the Arizona Department of Corrections PREA Coordinator and the MTC Assistance PREA Coordinator. Both individuals were well informed and extremely knowledgeable of PREA and the PREA Standards. A total of fourteen (14) inmates were interviewed. These included a disabled inmate (hearing impaired) and two inmates identifying as being gay. There were no transgender or intersex inmates nor were there any inmates there who reported prior victimization or sexual abuse while in this facility. Documentation, including policies, procedures and secondary documentation was reviewed to determine if the policies addressed the sub-standards of the standard. Secondary documentation was reviewed to determine “practice”. Interviews with specialized and randomly selected staff confirmed their knowledge of the agency’s policies and procedures as they related to PREA standards as well as “practice”. Inmates were interviewed to determine the training and information they received about PREA and to determine if they were given required information upon admission, during intake, orientation and during the “education” component of the PREA Training for inmates and to determine “practice”.

Forty-three standards were reviewed. One standard, 115.11, Zero Tolerance, is rated “Exceeded” the standard. Thirty-eight standards were rated “Met” the standard and four standards, were rated “Not Applicable. The not applicable standards were: 115.12, Contracting with other entities for the confinement of inmates; 115.14, Youthful Inmates; 115.18, Upgrades to facilities and technology; and 115.66, Preservation of ability to protect inmates from contact with abusers.

Number of standards exceeded: 1

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 4

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

Auditor 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.

Management and Training Corporation (MTC) Policy, 903E.02, Ensuring Safe Prisons, addresses MTC's commitment to a zero-tolerance standard toward all forms of sexual abuse and sexual harassment. Paragraph B.1., of that policy reiterates MTC's commitment to a zero-tolerance standard for sexual violence. Arizona Department Order, 125, Sexual Offender Reporting, requires a zero tolerance for sexual contact of any kind with inmates and offenders including sexual harassment, conduct, assault and/or contact, by inmates, staff, contractors, volunteers and others. Both policies integrate the Agency and Department's approach to prevention, reporting and responding to sexual abuse and sexual harassment. Definitions are included to ensure consistency in reporting and responding.

The agency's policy also requires that MTC designate an upper level PREA Coordinator for the company who has sufficient time and authority to develop, implement and oversee MTC's efforts to comply with the PREA Standards in all its facilities. Where an agency operates more than one facility, each facility is required to designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

MTC provided a Memo from the Senior Vice President designating the senior director, management and operational support, as the MTC PREA coordinator. An interview with the PREA Coordinator confirmed he is knowledgeable of the PREA Standards and has sufficient time and authority to perform his duties in that role. MTC has taken an additional step by designating an assistant PREA Coordinator. MTC's Policy and Audit Director, is designated as the assistant PREA coordinator. These individuals are higher level staff who have the authority and ability to implement the PREA Standards with the complete support of the Senior Vice President. Interviews with both the PREA Coordinator and the Assistant PREA Coordinator indicated they have an exceptional knowledge of PREA and both have invested considerable time and energy into working with their facilities to maintain compliance with all of the PREA Standards. They serve as excellent resource individuals for each facility and provide the guidance and support needed for their facilities to become successful. Their positions, as higher level company staff, enable them to have access to the Senior Vice President. They have the ability and authority to implement PREA in MTC Facilities. The Warden of the Arizona State Prison-Marana provided a memo dated July 16, 2016, appointing the facility's Program Administrator as the prison's PREA Compliance Manager. The memo states she has the correctional experience and sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards. Additionally, the Warden designated the Facility Program Specialist to serve as the backup PREA Compliance Manager for the facility. Organizational charts for the company and the facility identified the PREA Coordinator and PREA Compliance Manager's position within the organization. The PREA Compliance Manager for the Arizona State Prison-Marana is depicted on the organizational chart as reporting directly to the Warden.

An interview with the PREA Compliance Manager confirmed she is conscientious, very knowledgeable of the PREA Standards, committed to Zero Tolerance and has the support of the Warden, MTC Assistant PREA Coordinator and the Arizona PREA Coordinator. Conversations with the Arizona PREA Coordinator confirmed he has an excellent knowledge of the PREA Standards and is committed to implementing PREA in his facilities.

Interviews with staff, both randomly selected and specialized, confirmed they have been trained in and fully understand the facility has zero tolerance for sexual abuse, sexual harassment, sexual misconduct, and retaliation for reporting sexual abuse or sexual harassment or for cooperating with an investigation. Staff indicated they receive their PREA training on the Zero PREA Audit Report

Tolerance Policy initially during Pre-Service Training and annually through in-service training. They stated the facility will not tolerate any sexual activity, consensual or otherwise. Interviews with staff confirmed they are receiving PREA Training and are familiar with agency policies and the PREA Standards. One hundred percent of the interviewed inmates stated they were made aware of the zero-tolerance policy through intake, orientation, the inmate handbook and through multiple signs and posters located throughout the facility. Inmates indicated they were provided written information upon intake and education during orientation. During orientation, they said they watched the PREA Video, covered information in the inmate handbook and were given the opportunity to ask questions. When asked what they understood about zero tolerance, they explained that no sexual activity is allowed in this facility. They indicated they have received that information in every facility they have been in and that they received it at Marana as well.

This standard is rated “exceeds” because of the company and the facility’s commitment to zero tolerance as evidenced in MTC Policy, Arizona Department of Corrections Orders, by appointing two higher level company officials who have an exceptional knowledge of PREA to serve as PREA Coordinator and Assistant PREA Coordinator, through the appointment of an alternate facility PREA Compliance Manager and through multiple interviews with staff, inmates, contractors and volunteers indicating staff, volunteers and contractors are trained annually in the Zero Tolerance Policy and that inmates have received this information multiple times through multiple means.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

Auditor 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.

This standard is rated non-applicable. Management Training Corporation (MTC) manages and operates the Arizona State Prison-Marana. MTC is under contract with the Arizona Department of Corrections to house offenders. The Arizona State Prison-Marana does not contract with any outside entity for the confinement of offenders.

The company provided an example of a contract with the Arizona Department of Corrections. The contract requires, in 2.14, Federal Prison Rape Elimination Act 2003, section 2.14.1 that the contractor comply with PREA. MTC’s proposal to manage and operate the Arizona State Prison-Marana, sections, 1.11.1.12, Compliance with Prison Rape Elimination Act (PREA), states the company has adopted DO 125, Sexual Offense Reporting and its commitment to zero tolerance.

Standard 115.13 Supervision and monitoring

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

Auditor 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.

MTC Policy, 903E.02, 3., Supervision and Monitoring, paragraph a), affirms the requirement that all facilities, including MTC facilities, develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing and, where applicable, video monitoring to protect inmates against abuse. The company requires the facility to document each time the staffing plan is not complied with. The facility documents and must justify all deviations. Facilities are required to consider the following:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any findings of inadequacies from Federal Investigative agencies;
- Any findings of inadequacy from internal and external oversight bodies;
- All components of the inmate population;
- The composition of the inmate population;
- The number and placement of supervisory staff; institution programs occurring on a particular shift;
- Any applicable State of Local laws, regulations or standard;
- The prevalence of substantiated or unsubstantiated incidents of sexual abuse; and
- Any other relevant factors

Arizona General Order 574, Employee Assignments and Staffing, addresses scheduling, staffing procedures, and staffing levels/activities. Paragraph 1.11, Staffing Levels/Activities, defines required staffing as the level of staffing necessary to safely conduct normal activity within an institution. Policy addresses a number of considerations in developing and achieving adequate staffing. An interview with the Warden indicated the staffing pattern is established by the contract with the Arizona Department of Corrections. The staffing plan is provided in Contract Number: ADOC`1-057914/ADC No. 130052DC, Amendment Number 7. The reviewed plan consists of the following positions: 1) 9.0 Administrative Staff, including the Warden; 2) 10.06 Security Supervisors; 3) 46.01 Security Officers; 4) 16.5 Correctional Programs Staff; 5) 8.42 Medical Staff; 6) 7.0 Food Services Staff and 7) 2.0 Maintenance Staff for a total staffing of 98.99. The Warden, in an interview, indicated the minimum staffing is 10 correctional staff per shift. In deploying staff, the composition of the facility, custody level of inmates, program and work details and camera coverage is considered. To supplement coverage the Captain or the Major are available and on site, as scheduled, for weekend coverage. The Warden provided a memo indicating the Arizona State Prison-Marana, has not deviated from the staffing plan in the past twelve months.

Cameras are strategically located to supplement staffing and to enhance supervision of inmates. There are approximately 40 plus cameras deployed. The auditor is not going to provide further information related to these because of security concerns however, observations made during the tour confirmed this facility has a considerable number of cameras strategically located throughout the facility supplementing supervision.

Paragraph b) of MTC Policy 903 E.02 requires that at least annually, in collaboration with the PREA coordinator, the facility reviews the staffing plan to see whether adjustments are needed in (a) the staffing plan (b) the deployment of monitoring technology or (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance. The Warden and PREA Compliance Manager, in interviews confirmed the process for conducting annual reviews. The Warden also provided written confirmation of annual review in a Memo entitled “Annual Review of Staffing Plan” dated July 11, 2016. The Warden reported in the memo, that in collaboration with the PERA Coordinator, the facility has reviewed the substantiated and unsubstantiated allegations of sexual violence for the calendar year 2016. There were no allegations of sexual violence and no deviations from the staffing plan and as a result of the review there is no need for adjustments to the staffing plan. The Warden also continued stating that MTC is committed to continually improving surveillance technology however the need to do so is not demonstrated based on the number of incidents of sexual violence. These is similarly no need for additional resources to reduce incidents of alleged sexual violence.

Paragraph c) of the MTC Policy requires intermediate and higher level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Documentation of the unannounced rounds is required and over time they will be performed on all shifts and all areas of the facility occupied by inmates. Staff are prohibited by policy from alerting other staff of the conduct of such rounds. PREA rounds are unannounced unless the announcement is related to the legitimate operational functions of the facility. MTC Policy 903A.03, Patrols and Inspections, D., requires facility intermediate-level and higher-level staff to conduct and document unannounced rounds designed to identify and deter staff sexual abuse and sexual harassment. This policy also prohibits staff from alerting other staff of the conduct of such rounds.

The facility provided documentation to confirm unannounced rounds are being conducted. Unannounced rounds are documented on each shift, as required. Additional logs were provided documenting PREA rounds. Interviews with the Warden and other higher level staff, including staff serving as duty officer, indicated unannounced PREA rounds to deter sexual activity are conducted and documented. Staff related unannounced checks are made on all shifts and these checks consist of checking blind spots and other areas where clandestine sexual activity may be occurring.

Additionally, the Warden provided a Memorandum to the Contract Operations Bed Director reporting on security operations and facility tours/inspections and/or practices, professional conduct of staff, staffing, training, unannounced tours and water conversation. This document identified multiple inspections conducted during the month of June 2016. It also contained a statement affirming that the Warden has conducted unannounced rounds on all shifts and all areas of the facility as required. He reported he did not see any inappropriate behavior by staff.

Standard 115.14 Youthful inmates

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

Auditor 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.

This standard is rated non-applicable. The facility provided a MEMO stating the contract between the Arizona Department of Corrections and the Arizona State Prison-Marana is for the management and operations of adult male offenders. Arizona State Prison-Marana does not house any juvenile offenders. The memo goes on to state “should a juvenile be inadvertently delivered to the facility, they will be secured in a restricted housing unit pending removal and delivery to the correct housing location at a different facility. The facility also provided examples of age group counts that reflected there were no youthful inmates at the facility.

Interviews with the Warden and randomly selected staff indicated youthful offenders are not housed in this facility. Interviewed randomly selected staff stated youthful inmates are not housed at this facility and during the audit period no youthful offenders were observed.

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)

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

Auditor 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.

MTC Policy, 306, Inmate Searches, Paragraph 6, a-c and MTC Policy, 609, Ensuring Safe Prisons-Prison Rape Elimination Act, Limits to Cross-Gender Viewing and Searches, requires the facility to train security staff in how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. It also states that staff are not to conduct cross gender strip searches, absent exigent circumstances. If exigent circumstances exist, staff are required to document all cross-gender strip searches and visual body cavity searches. Policy 903E.02, Ensuring Safe Prisons, Paragraph 5, Limits to Cross-Gender Viewing and Searches, a) through f), addresses each item required by the standards as well. Arizona Department of Corrections, Department Order: 708, Searches, 1.6, Pat Search, 1.6.1, requires pat searches to be performed by staff of the same gender as the subject being searched whenever possible with the following exceptions: female officers may pat search male inmates if no male staff is available to conduct the search within a reasonable amount of time and if pat searches are conducted by a staff member who is not the same gender as the inmate one additional staff member must be present whenever possible. 1.7, of the policy requires strip searches to be conducted by staff of the same gender. The facility provided a memo from the Warden stating the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. If there is an exigent circumstance or if medical conducts the search the following is required: 1) Notification to the shift commander, medical, major, duty officer, Warden and Deputy Warden of the incident; 2) authorization from the Warden, in conjunction with the ADC Deputy Warden/Contract Monitor is required prior to conducting the search; 3) Document the search in the Cross-Gender Strip/Visual Body Cavity Search Log and 4) Complete a Significant Incident Report.

A memo from the PREA Compliance Manager confirmed the contract between the Arizona Department of Corrections and the Arizona State Prison-Marana is for the management and operations of adult male offenders and female offenders are not housed in this facility. Interviewed staff related female staff do not conduct cross-gender pat searches of male inmates unless a male officer is not available. Interviews with inmates confirmed that none of them had been strip or pat searched by a female officer.

The reviewed power point slides for PREA Security Training: Pat-Down on Cross-Gender, Transgender or Intersex, provides guidelines for conducting pat-down searches on cross-gender, transgender and intersex inmates. The facility provided samples of documentation to confirm staff have received and receive search training consistent with the policy annually. Additionally, the facility provided a memo from the Warden confirming the Arizona State Prison-Marana has provided Cross-Gender/Transgender/Intersex Pat Down Search Training to 100% of security staff during annual in-service training for the training year July 1-June 30, 2016.

Interviews with staff and inmates indicated that females do not conduct strip searches in this facility however they may conduct "pat" searches of male inmates. Female staff, when requested, demonstrated cross gender pat search procedures for the auditor. The search demonstrations were consistent with the training. Staff, when asked, confirmed search training included searching transgender and intersex inmates in a professional and respectful manner. Interviews with staff indicated cross-gender strip searches are not allowed absent an emergency and cross-gender pat searches are allowed only when a male officer is not available.

Paragraph L of MTC Policy requires that transgender and intersex inmates are not to be searched or examined by non-medical staff for the sole purpose of determining the inmate's genital status. Genital status is to be determined by interviews or through reviewed medical records reviews and Paragraph b. prohibits searches and/or examinations of

transgender or intersex inmates for the sole purpose of determining the inmate's genital status. One hundred percent of the interviewed staff stated they are not allowed to nor would they search a transgender or intersex inmate for the sole purpose of determining their genital status. Documentation was provided confirming that 100% of the security staff received search training during annual service training conducted between July 1, 2016 and June 30, 2016. A memo from the Warden confirmed there have been no incidents involving searches of transgender or intersex inmates assigned to the Arizona State Prison-Marana. The memo was dated July 16, 2016. There were no intersex or transgender inmates at the facility during the audit period. The facility also provided a copy of a blank Search Log Form confirming there have been no cross- gender strip, visual body cavity searches conducted. The form was dated 5/10/16. The PREA Compliance Manager confirmed there have been no cross-gender strip or visual body cavity searches conducted since then.

MTC Policy 903E.02, Limits to Cross-Gender Viewing, c), requires the facility to implement policies and procedures that enable inmates to shower and perform bodily functions and change clothing without non-medical staff of the opposite gender viewing the breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. One hundred percent of the interviewed inmates stated they are never naked in full view of staff and are provided privacy while changing clothes, showering and using the restroom. Observations of restroom and showers confirmed inmates are afforded privacy when using the restroom, showering and changing clothing. Half walls are arranged at the bed areas to provide a little privacy even in an open bay dormitory style pod. All the interviewed inmates reported they are never naked in full view of cross-gender staff.

MTC Policy 903E.02, Ensuring Safe Prisons, requires staff members of the opposite sex of the inmate population in their facility must announce their presence when entering an inmate housing unit. Announcements are required to be logged into the housing unit daily log. The facility provided photos of signs requiring staff of the opposite gender to announce their presence when entering housing units of the opposite gender. Signs requiring staff of the opposite gender to announce their presence when entering the housing unit were observed at each living unit. Interviewed inmates, both male and female, confirmed that cross gender staff consistently announce their presence prior to coming into the living unit.

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, Paragraph 6, Inmates with Disabilities and Inmates who are Limited English, (a) requires MTC to take appropriate actions to ensure inmates with disabilities and limited English proficient inmates have an equal opportunity to participate in or benefit from all aspects of MTC's efforts to prevent, detect and respond to sexual abuse and sexual harassment. MTC would do this by contracting with interpreters or other professionals (including designated facility staff) to ensure effective communication with inmates who are limited English proficient and by developing written materials used for effective communication about PREA with inmates with disabilities or limited reading skills and lastly by training staff on PREA compliant practices for inmates with disabilities. Paragraph b) of the policy requires that, for PREA related activities, MTC prohibits the use of inmate interpreters, inmate readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties or the investigation of the inmate's allegation. The facility provided a contract with Language Line Services to provide interpretive services. Arizona Department of Corrections,

Department Order 704, Inmate Regulations, 704.15, Interpreters, require Wardens and Deputy Wardens to provide interpreters for inmates in need of such services, which may include interpreters for language, literacy, the deaf and the blind. Policy requires them to recruit and provide interpreters in the following order: 1) A staff member within the same prison or facility; 2) A staff member in another institution, facility or Bureau within the Department or 3) A volunteer from a community service agency. A list of interpreters, by language, is to be maintained. The facility provided a list of interpreters. The Warden, in a memorandum entitled, "Americans with Disabilities Act (ADA) Notice, dated July 12, 2016, states Marana does not discriminate based on disability in admission to, access to, or operations of its programs, services or processes, including hiring or employment practices. ADA Liaisons are listed with contact information.

A power point training slide #12, Inmates with Disabilities and Limited English Proficient (LEP) Inmates instructs staff not to rely on inmate interpreters or readers.

A memo from the Warden, dated July 12, 2016, entitled, "Inmate Interpreters" states Arizona State Prison-Marana, has not and will not utilize inmate interpreters, readers or other types of inmate assistants concerning any PREA issues; except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of the first response duties under 115.64, or investigation of the inmate's allegation. If this occurs, all details concerning the incident would be documented in a Significant Incident Report. It also affirms that in the last 12 months, ASP-Marana has not had any reported PREA related incidents where inmate interpreters, readers or other type of inmate assistants were utilized. The Human Resources Manager provided a list of staff interpreters, dated July 12, 2016. There are 25 staff interpreters listed. Times that they are available on duty are listed and one staff is listed as "on-call". These staff represent security, programs and medical.

Interviewed staff consistently stated they would not allow, except in emergency situations, an inmate to translate or interpret for another inmate in making an allegation of sexual abuse. They indicated there were staff always on duty who spoke Spanish, the predominant language of the inmates. There were no disabled inmates at the facility during the audit period.

Standard 115.17 Hiring and promotion decisions

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

Auditor 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.

Arizona State Prison-Marana has a hiring and background check process that exceeds the requirements of the standards. MTC Policy 903#.02- Ensuring Safe Prisons, page 8, paragraph 7(a) – (c), Hiring and Promotion Decisions, states that MTC prohibits hiring and/or promoting staff who have contact with inmates who have engaged in sexual abuse and/or sexual harassment. Policy also requires that omission or providing materially false information is prohibited. Contractors having contact with inmates must have a background check before providing services and every five years of continued service in accordance with MTC Policy 13.20, Purchase Policy. MTC Policy 201.3, Background Checks, C., advises that background checks will be performed based on the relevancy of job-related duties required for a particular position. Employment action, up to and including termination, will be taken if the background check is unfavorable or reveals information not reported or contrary to the information that is self-reported during the hiring the process. Policy requires the human resources manager to ensure the appropriate background checks are conducted.

An interview with the Warden's Administrative Assistant confirmed a hiring and promotion process that exceeds the requirements of the PREA Standards. Applicants respond to the PREA Questions as a part of the interview process and document their response on the interview form. The Administrative Assistant provided the auditor with interview questions for a variety of positions within the facility. Each of the questionnaires included the PREA Questions. Sampled questionnaires documenting applicants responding to those questions were also provided for review.

Selected applicants undergo background checks through the National Criminal Information Center (NCIC). The NCIC check is done on newly hired staff, new volunteers and contractors and then repeated every five years for staff. Checks are performed by the Arizona Department of Corrections with results sent to the facility by the Arizona Department of Corrections Contract Beds Bureau. All security staff are required, in addition to a successful background check, to take a psychological assessment that is forwarded to AZ Police Psychology who evaluate the response of potential employees. Upon promotion, staff are background cleared once again through the Arizona Department of Corrections. All clearances are run through the Arizona Department of Corrections Contract Bed Bureau.

The auditor reviewed a sample of background checks for newly hired staff, staff who were promoted and staff at five years. In addition to the PREA related questions asked of applicants, the facility uses a "Reference Verification Report", providing a consent for release of information and asking the previous employer if the individual had any substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse against the individual. The auditor also reviewed samples of PREA Questions as well as samples of Reference Verification Reports.

Volunteers and contractors are background checked annually through the Arizona Department of Corrections. The Administrative Assistant is extremely organized and maintains binders listing all contractors, those coming into the facility under escort and those supervising inmates on work details, along with their background check and training dates. Staff, volunteers and contractors have an affirmative duty to report and arrests within 24 hours.

Standard 115.18 Upgrades to facilities and technologies

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

Auditor 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.

This standard is rated non-applicable. MTC Policy 903 E.02, Ensuring Safe Prisons, paragraph 8, Upgrades to Facilities and Technology, require when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, MTC will consider the effect of the design, acquisition, expansion or modification upon the agency's ability to protect inmates from sexual abuse. Also, when installing or updating a video monitoring system, electronic surveillance system or other monitoring technology, MTC will also consider how such technology may enhance the facility's ability to protect inmates from sexual abuse.

The facility provided a diagram of camera locations. These will not be described in the interest of security. A memo from the Warden, dated July 20, 2016, confirms the Arizona State Prison-Marana has not made any substantial expansions or modifications to the existing facility since August 20, 2012. The memo also confirmed the facility has not installed or updated video monitoring systems, electronic surveillance systems or other monitoring technology since the last PREA Audit Report

PREA audit, except for two additional cameras placed in the dining hall.

The Warden and PREA Compliance Manager related they are always included in any plans for expanding or modifying the existing physical plant to ensure the safety of inmates and staff and/or when considering upgrading monitoring technology or adding additional cameras.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, Paragraph 9, Evidence Protocol and Forensic Medical Examinations, a) through e), provides for the following; To the extent MTC is responsible for investigating allegations of sexual abuse, MTC will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The Facility does not house youth. MTC offers all victims or sexual abuse access to forensic medical examinations whether on-site or at an outside facility without financial cost, where evidentiary or medically appropriate. Examinations are required to be performed by Sexual Assault Forensic Examiners or Sexual Assault Nurse Examiners, where possible. If they are not available the exam can be performed by other qualified medical practitioners. MTC has to document their efforts to provide SAFEs or SANEs. MTC will attempt to make available a victim advocate from a rape crisis center and if a rape crisis center is not available or unwilling to provide victim advocate services, the agency will make available to provide these services, a qualified staff member from a community based organization, or a qualified MTC staff member. If a staff member is used, the staff member's qualifications will be documented and maintained. If MTC is not responsible for investigating allegations of sexual abuse and relies on another agency to conduct these investigations, MTC will request, through agreement or MOU, that the responsible agency follow PREA requirements for evidence protocol and forensic examinations.

Arizona Department of Corrections Department Order, 100, Sexual Offense Reporting, 128.08, Investigations, 1.2, requires Wardens to request investigations as outlined in Department Order #608, Criminal Investigations and provide written notification to the Division Director for Offender Operations through the appropriate Regional Operations Director when an investigation involving a staff on inmate sexual assault allegation is opened. Once the criminal investigation is initiated, an administrative investigation will be initiated as outlined in Department Order # 601, Administrative Investigations and Employee Discipline. Investigations of inmate sexual assaults shall be actively pursued and closed upon exhaustion of all evidence processes and investigative leads. Arizona Department of Corrections Department Order, 608.03, Crime Scene Preservation, 608.05, Preservation of Biological Evidence and Retention Periods, provide directions for preserving potential evidence so that it can be collected with no contamination or degrading of the evidence. These Department Orders also discuss protecting physical evidence, crime scene investigation and preservation of biological evidence. All the investigators for the Department have received training in conducting investigations in confinement settings. An interview with a Criminal Investigations Unit Investigator confirmed that he has received specialized training including training in a classroom setting as well as on-line. Criminal Investigators are also certified as Peace Officers and are able to make arrests. Policy outlines a uniform protocol for collecting and preserving evidence.

The Warden provided the auditor a Memorandum dated July 12, 2016, advising that the Arizona Department of Corrections PREA Audit Report

has the responsibility for conducting administrative and criminal sexual abuse investigations.

Interviews with the PREA Compliance Manager and medical staff indicated that in the event of a sexual assault, the inmate would be taken immediately to the Tucson Medical Center for additional treatment and a forensic examination conducted by a Sexual Assault Nurse Examiner. An interview with the Health Services Administrator indicated there have been no cases requiring a forensic examination. A Memo from the Warden confirmed Arizona State Prison-Marana has not had any allegations of sexual abuse in the past twelve months however, if they had, they would use Sexual Assault Nurse Examiners for all investigations involving sexual assaults. This is directed by Arizona Department of Corrections Policy, Department Order # 608, Criminal Investigations and all efforts to provide a SANE/SAFE are documented in a Significant Incident Report, form 105-3.

This facility provided multiple documents to demonstrate their efforts to secure outside advocacy emotional support services. There is no doubt they have gone well beyond due diligence to secure those services for the inmates. The facility developed a MOU however it could not be signed by the Southern Arizona Sexual Assault Center. The PREA Compliance Manager then attempted to secure training for staff to serve as victim advocates. An email from the Arizona Coalition to End Sexual and Domestic Violence advised the PREA Compliance Manager to complete a webinar provided by Just Detention International. Documentation was provided by Just Detention International confirming Marana staff completed the webinar, "Reaching Behind Bars: Crisis Intervention for Incarcerated Survivors". The link for advocacy training was provided. The facility also provided a certificate to confirm that a staff completed advocacy training provided by the Arizona Coalition to End Sexual and Domestic Violence, dated February 24, 2014. The PREA Compliance Manager also provided an email to the Arizona Department of Corrections PREA Coordinator soliciting advice in securing advocacy services.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, B.10, Referrals of Allegations for Investigations, (a)-(c), affirms that MTC will ensure that all allegations, including inmate-on-inmate sexual abuse or staff-on-inmate sexual misconduct are referred to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. If administrative or criminal investigations of alleged sexual abuse are performed by an entity other than MTC, efforts will be made to obtain the agency's investigative policy and MTC will be responsible for making the entity aware of investigative requirements under PREA. Arizona Department of Corrections Department Order, 125, Sexual Offense Reporting, 126.06, Investigations 1.2, requires Wardens to request investigations as outlined in Department Order # 608, Criminal Investigations, and provide written notification to the Division Director for Offender Operations through the appropriate Regional Operations Director when an investigation involving a staff on inmate sexual assault allegation is opened. Once the criminal investigation is initiated, an administrative investigation will be initiated as outlined in Department Order # 801, Administrative investigations and Employee Discipline. Section 1.3 requires investigations of inmate on inmate sexual assaults to be actively pursued and closed upon exhaustion of all evidence processes and investigative leads. Administrative investigations will include an effort to determine whether staff actions or failure to act contributed to the abuse. This is documented in the investigation report and includes a description of the physical and testimonial evidence and investigative facts and findings. Criminal investigations are documented in a written report that contains a description of physical, testimonial and documentary evidence. The Inspector General retains all written reports.

Arizona Department of Corrections, Department Order, # 608, Criminal Investigations, # 608.02, Criminal Activity, 1.2, On-Site Criminal Activity requires all on-site criminal activity to be referred to the Criminal Investigation Unit (CIU) for possible investigation. Arizona Department of Corrections, Department Order, # 608.08, Sexual Assault, 1.1, Sexual Assault/Abuse Significant Information Reporting, outlines the procedures for responding to an allegation involving sexual abuse.

An interview with a facility investigator indicated he conducts the initial investigations and sends referrals, as needed, to one of the CIU investigators. The investigator stated he had completed the required specialized training for investigators and described a process consistent with the standards and policy. An additional interview with a Criminal Investigation Unit Investigator confirmed the process for receiving an allegation and for conducting the investigation. Interviewed staff stated they have been trained to report everything for investigation, including reports, knowledge, allegations and suspicions of sexual abuse or sexual harassment. They affirmed they are trained to accept reports from all sources, including third parties and anonymous reports.

The Warden provided a Memorandum dated, July 14, 2016, confirming the facility has had no allegations of sexual abuse or sexual harassment; no allegations resulting in administrative and/or criminal investigations (and both would be documented on a Significant Incident Report) and that the Arizona Department of Corrections has published all policies on the ADOC website, azcorrections.gov. MTC also provides information related to reporting and investigations in MTC facilities.

Standard 115.31 Employee training

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, B.11, Employee Training, states that MTC trains all employees on matters related to PREA as detailed in MTC Policy 901D.02, Training Requirements. MTC Policy, 901D.02, C.4 Training Requirements, requires that training is tailored to the gender of the inmates at the facility. It also reiterates that employees reassigned from facilities housing the opposite gender are given additional training and between training, MTC provides the employee information about current policies, regarding sexual abuse and harassment. It also requires sexual abuse and sexual harassment training will be provided in pre-service and in-service training and include the following: 1) MTC's Zero Tolerance Policy for sexual abuse and sexual harassment; 2) How to fulfill their responsibilities under MTC sexual abuse and sexual harassment prevention, detection reporting and response policies and procedures; 3) The right of inmates to be free from sexual abuse and sexual harassment; 4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; 5) The dynamics of sexual abuse and sexual harassment in confinement; 6) The common reactions of sexual abuse and sexual harassment victims; 7) How to detect and respond to signs of threatened and actual sexual abuse; 8) How to avoid inappropriate relationship with inmates; 9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender-non-conforming inmates; and 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. MTC also documents that employees understand the sexual abuse and sexual harassment training they receive.

Power Point slides demonstrating the PREA training indicated the training covered all the required topics and more. An interview with the facility training coordinator indicated staff receive PREA Training during pre-service training for newly hired security employees and annually during annual in-service training. Non-security staff receive PREA training during Pre-Service and annually thereafter during annual in-service. Contractors and volunteers receive PREA Training initially and

PREA Audit Report

annually during in-service training. Contractors also receive initial PREA Training and annually thereafter during annual in-service training. Off-site contractors also receive initial PREA Training followed by annual training in PREA during annual in-service training.

The Warden provided a Memorandum dated February 10, 2017, affirming that they have not received any staff or had any reassigned from a facility housing inmates of the opposite gender requiring additional PREA Training. The memo affirms the facility has provided PREA training as required for all employees (total 163 employees). It also affirms employees are provided with training and updates regarding sexual abuse and sexual harassment through the PREA Compliance Manager and Training Officer through memoranda, classes and acknowledgements of policy readings. Lastly the memo affirms staff are provided refresher training on PREA requirements annually to all employees. The facility provided seven pages of training rosters confirming annual PREA training. Interviews with staff indicated they are all well trained in PREA. Every staff related they are trained during pre-service training for new employees and all stated they then are trained annually thereafter in PREA during annual in-service training.

Standard 115.32 Volunteer and contractor training

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

Auditor 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.

MTC Policy, Ensuring Safe Prisons, Paragraph 12. Volunteer and Contractor Training, requires all volunteers and contractors who have contact with inmates to be trained in compliance with MTC Policy, 901D-02, Training Requirements. MTC Policy 901D.02, Training Requirements, 10., Part Time, Volunteer, and Contractor, requires that volunteers and contractors who have contact with inmates will be trained on their responsibilities under MTC's policies and procedures regarding sexual abuse/harassment prevention, detection and response. The level and type of training provided to volunteers and contractors is based on the service they provide and level of contact they have with inmates. All volunteers and contractors who have contact with inmates have at least been notified of MTC's zero tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. MTC maintains documentation confirming that the volunteer/contractors understand the training they have received. The facility also provided the Arizona Department of Corrections Course for Non-ADC Personnel/Temporary Employee Annual Training was provided for review. The Prison Rape Elimination Act portion of that training advises that the Arizona Department of Corrections has established a zero-tolerance standard of inmate sexual conduct including sexual conduct, sexual assault and/or sexual contact, by inmates, staff, contractors, volunteers and others. In addition to the zero-tolerance policy, volunteers and contractors are advised of actions they are required to take in the event they become aware of any sexual abuse or sexual harassment. Training requires them to intervene, separate the inmates and immediately notify the security supervisor by phone. If the victim reports a sexual assault, staff, contractors or volunteers will immediately isolate the inmate from other inmates for protection and, to preserve evidence ensure that the inmate does not wash, brush their teeth, shower or change clothing prior to the physical examination conducted by medical staff. Volunteers and contractors are trained not to leave the victim alone until evaluated by medical/mental health staff. They are also advised they must complete and information report. The facility provided a training roster documenting a four (4) hour block of training for volunteers and contractors. Additionally, the Warden affirmed, in a memo dated February 9, 2017, that 119 volunteers/contractors have been trained in the Prison Rape Elimination Act. PREA Training is included in the Arizona Department of Corrections Non-ADC Personnel/Temporary Employee Annual Training. The level and type of training provided to volunteers and contractor is

PREA Audit Report

based on the services they provide and level of contact they have with inmates.

Interviews with two contractors indicated they received initial training in PREA and have received training annually during annual in-service. The contractors not only described the training they receive annually; they identified the agency's requirement for zero tolerance for all forms of sexual activity. Additionally, they were informed how to report and to whom to report but interestingly they all articulated their responsibilities essentially as first responders including separating the inmates and protecting the evidence. According to the Administrative Assistant if a volunteer or contractor does not complete their annual in-service training they may not be allowed to continue with their services.

Standard 115.33 Inmate education

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, Paragraph 13., Inmate Education, a), states that inmates receive information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment at intake. Training may include: Definition of Sexual Violence; Specifics about the PREA; Rights as a Victim; Prevention/Intervention; Self-protection, Reporting Sexual Violence; Treatment and counseling; Information about the effects of Sexual Violence on Victims; Who to contact if an offender feels vulnerable; How to contact outside Victim services providers; How to report incidents that happen to others; Ways to avoid sexual violence; What happens to an offender who makes a false report; and Confidentiality. Inmates who are transferred from one facility to another will be educated regarding their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on MTC policies and procedures of the new facility to the extent that the policies and procedures of the new facility differ from those of the previously facility. Policy addresses the fact that PREA education is available in accessible formats for all inmates including those who are limited English proficient, deaf, visually impaired or otherwise disabled or limited in their reading skills. Participation in PREA education is documented and maintained by the facility. The facility also ensures that key information about MTC's PREA policies is continuously and readily available or visible through posters, inmate handbooks or other written formats. Inmates are provided PREA Related information in the MTC, Arizona State Prison-Marana, Inmate Sexual Abuse/Assault Prevention and Intervention handbook. In addition to providing definitions of PREA related terms, the handbook advises inmates of their right to be safe from sexual assault, information about safety, prohibited acts, inappropriate staff conduct, what to do if you are assaulted, understanding the investigative process, counseling programs for victims and how to report an incident of sexual assault (tell a staff, a correctional programs officer, counselor, Chaplain, Psychologist, medical staff, security staff, Warden, or any other trusted staff, write the Warden, Write the Office of the Inspector General) ; Confidentiality and Avoiding sexual assault.

During intake, inmates are given the inmate handbook, advised of the agency's zero tolerance policy and given information on how to report. During orientation, additional PREA related information is provided and the PREA Video is shown. The staff conducting intake/orientation advised that at the end of orientation they give inmates the opportunity to ask questions to clarify anything they do not understand. Inmates acknowledge receipt of the PREA Handbook and attest that they were provided a comprehensive class and have reviewed the PERA Video.

In addition to affirming they have received the PREA Handbook, inmates acknowledge by signature they have attended the Orientation class. This information is then entered into the computer based inmate record, documenting the inmate has PREA Audit Report

received the PERA Pamphlets, Education and the PREA Video. Sample computerized entries into the inmate's record were provided for review as well as training rosters signed by inmates.

The Warden, in a memo dated, July 15, 2016, Entitled, "PREA Training for Inmates-PREA", confirmed that 508 inmates admitted to the facility during the past twelve months and that Marana provides comprehensive training/orientation to all those inmates to include a PREA Video, PREA Handbook and PREA briefing by the PREA Compliance Manager. Interviews with inmates confirmed that upon admission they were told of the agency's rules against sexual abuse and sexual harassment (zero tolerance) and how to report it if it occurred. They stated that on admission they were also given the inmate handbook. They also consistently stated that either the same or next day they were given additional information and watched the PREA Video. When asked how PREA information was given to them they stated via the video and through the handbook after which they said the staff providing orientation gave them the opportunity to ask questions if they needed to. Inmates also reported they have received PREA information in every facility they have been housed in. All of them could list multiple ways they could report allegations of sexual abuse or sexual harassment if they needed to.

Standard 115.34 Specialized training: Investigations

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

Auditor 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.

MTC Policy, 903E-02, 14. Specialized Training Investigations, a and b, requires if MTC conducts its own investigations of allegations of sexual abuse, investigators are trained in conducting sexual abuse investigations in confinement settings. Documentation of such training will be maintained showing that investigators have completed the required training. If an external agency or DOJ component conducts investigations of allegations of sexual abuse, all agents and investigators are trained in conducting investigations in confinement settings. Additionally, the reviewed Arizona Department of Corrections policies, comprehensively and with specifics, address both administrative investigations and criminal investigations. A memo from the Warden, dated July 16, 2016, "Specialized Training: Investigations", confirmed Arizona State Prison-Marana does not conduct its own investigations of allegations of sexual abuse. He related the facility is supported by the Arizona Department of Corrections Criminal Investigation Unit whose investigators have all completed Arizona Peace Officer Standards and Training and are board certified, which includes PREA Investigations training. Records of that training are maintained. He also reported that the Arizona State Prison-Marana has seven (7) Criminal Investigation Unit Investigators who would be responsible for investigating allegations of sexual abuse in the facility.

Certificates, documenting that each of the investigators completed the NIC On-Line Training, "PREA: Investigating Sexual Abuse in a Confinement Setting" were provided and reviewed. An interview with a Criminal Investigations Unit Investigator confirmed he is certified as a Peace Officer and has completed the comprehensive training associated with that. Additionally, he related he completed the NIC On-Line Specialized Training, "PREA: Investigating Sexual Abuse in a Confinement Setting". The investigator was very knowledgeable of the investigation process. Another interview with the facility investigator indicated he has also been trained to conduct administrative investigations

Standard 115.35 Specialized training: Medical and mental health care

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 15., Specialized Training Medical and Mental Health Care, requires that all medical and mental health care practitioners who work regularly in its facilities have been trained in the following: 1) How to detect and assess signs of sexual abuse and sexual harassment; 2) How to preserve physical evidence of sexual abuse; 3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment and; 4) How to respond effectively and professionally to victims of sexual abuse and sexual harassment, and; 5) How to and to whom to report allegations or suspicions of sexual abuse and sexual harassment. MTC also is required to maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the customer agency or elsewhere. In addition to the specialized training, medical and mental health staff are required to receive the training mandated for employees or for contractors and volunteers depending on the practitioner’s status at the agency. MTC Provided a lesson plan entitled, “Prison Rape Elimination Act (PREA)-Medical Staff Education”. Session objectives included the following: 1) Describe what PREA stands for 2) Know what a rape kit is for 3) Know how to preserve DNA, 4) Recognize the signs of victims and 5) Actions to take in case of a PREA incident. Sampled training rosters documented that all seven employees have received the specialized training and additional training rosters confirmed they have received the mandated PREA Training required of all other staff. A memo from the Warden, dated, July 18, 2016 confirmed that all mental/medical health care practitioners have received the training required by the standards and policy. The memo confirmed Arizona State Prison-Marana has no medical staff who conduct forensic examinations. Inmates are sent to a hospital where qualified SANE/SAFEs are utilized by the Arizona Department of Corrections, who is responsible for conducting investigations.

The interviewed Health Services Administrator confirmed that all medical and mental health care staff have received both the specialized training required of medical and mental health practitioners as well as the mandated PREA Training for all employees. She related her staff do not conduct forensic examinations. Victims of sexual abuse would, she indicated, be sent to Tucson Medical Center where there are SANEs staff. She also explained what her role would be in the event of a sexual assault, including separating the inmates and providing initial first aid/treatment for trauma, for protecting evidence and arranging the inmate’s transportation to the Tucson Medical Center for the forensic exam.

Standard 115.41 Screening for risk of victimization and abusiveness

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, 16., Screening for Risk for Sexual Victimization and Abusiveness, a) through d), requires that inmates be screened, using an objective screening instrument, for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. The facility may determine the screening instrument to be used in consultation with MTC PREA Coordinator and the customer agency. The recommended instrument to be used is the MTC form, Screening for Risk of Victimization and Abusiveness. Within 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information that bears on the inmate's risk of sexual victimization or abusiveness. An inmate will be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Policy also prohibits inmates from being disciplined for refusing to answer or for not disclosing complete information in response to questions asked regarding mental, physical or developmental disability, whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming, whether the inmate has previously experienced sexual victimization or the inmate's own perception of vulnerability. Also, MTC implements appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this policy in order that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The Screening instrument being used by Marana is the Screening for Risk of Victimization and Abusiveness, Management and Training Corporation. In addition to questions asked of the inmate the screener is required to verify information contained in the inmate's records. Certain responses require a referral to Psychology Services. The auditor reviewed referrals to mental health as well as documentation to confirm the inmate was seen by mental health and seen within 14 days.

Screening activity is described by the Warden in a memo dated July 18, 2016 entitled, "PREA Screening of Inmates-New Admissions/Transfers". Procedures described include the following: 1) Following intake all inmates will be sent to medical for screening, including PREA related screening; 2) Inmate's disclosing information about previous sexual abuse/harassment will require immediate notification to the shift commander; 3) The inmate will be referred for follow-up to mental health for evaluation within 14 days from the date of arrival; 4) Correctional Programs Officers (CPO) will complete the full screening document within 72 hours of arrival, reviewing among other documents, the AIMS information. If the CPO finds that the inmate is at risk of victimization or is potentially at risk of abusiveness, the CPO will immediately notify the shift commander; 5) The correctional program manager will consider the need for any programming adjustments based upon reviews; 6) The shift commander will determine if the inmate needs to be placed in restricted housing pending further evaluation/mental health review. The inmates, who are determine by the shift commander to be ready for placement will be assigned appropriate housing; 7) Based upon any additional relevant information received by the facility since the intake screening, the facility CPO will reassess each inmate's risk of victimization or abusiveness within 30 days after the inmate's arrival at the facility or within 7 days if the information is received more than 30 days after the inmate's arrival' 8) The Correctional Program Manager will be responsible, by the 10th of the next month, for advising the PREA Compliance Manager on a monthly basis of the number of reassessments that were completed the previous month; 9) An inmate's risk level will be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness and 10) Inmates may not be disciplined for refusing to answer the questions on the screening document.

A memo from the Warden, dated July 18, 2016, entitled, "Screening for Risk of Victimization and Abusiveness" affirmed that the Arizona State Prison-Marana had 508 inmates admitted to the facility during the past 12 months. The memo states that all inmates were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

An interview with the PREA Compliance Manager indicated inmates being admitted to the Arizona State Prison-Marana are screened initially at the Arizona Department of Corrections, Alhambra Facility prior to being sent to Marana. Upon arrival at Marana, the screening for risk of victimization or abusiveness is repeated. This information is then entered into the Adult Information Management System (AIMS). A staff responsible for conducting the risk screening was interviewed. He related he conducts a review of the information contained in the Adult Information Management System by looking at relevant screens. He also reviews the institutional file on the inmate. He related that not later than the day following admission he

conducts the risk screening (and not later than 72 hours after arrival). He related the AIMs system is sophisticated and as additional information is added to the inmates computerized file, a reassessment trigger may be generated automatically. Interviewed inmates consistently related they were asked the questions associated with the risk screening.

Standard 115.42 Use of screening information

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

Auditor 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.

MTC Policy 903E-02, Ensuring Safe Prisons B.17, Use of Screening Information, a), requires MTC to use information from the risk screening required to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. Individualized determinations about how to ensure the safety of each inmate will be made. The housing assignments for transgender or intersex inmates will be made on a case by case basis.

Arizona State Prison-Marana has not had any inmates who have scored high for victimization or for abusiveness. The criteria for this program make it unlikely that an inmate at risk for either victimization or abusiveness will be sent to the program. Inmates are however screened at the facility at Alhambra for risk and screened again at Marana. In the event an inmate was at risk, the facility would utilize that information to determine housing, bedding assignments, programming and work details.

The Warden provided a memo dated July 18, 2016 confirming there have been no transgender or intersex inmates housed at Arizona State Prison-Marana. If they did, placement and programming assignments for each transgender and intersex inmate would be reassessed at least twice a year to review any threats to safety experienced by the inmate. The memo also affirms the facility would give serious consider to a transgender and intersex inmate’s own views with respect to his own safety and they will always be afforded the opportunity to shower in the detention shower located in Building #2.

Interviewed staff related how the information from the risk screening process is used to determine housing/bed placement, as well as to determine appropriate work details and education or other program assignments. Staff indicated the inmates who were transgender or intersex would be allowed to shower separately.

Standard 115.43 Protective custody

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, 18. Protective Custody, a), prohibits placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Paragraph b), states, if an involuntary housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

A memo dated, July 18, 2016, “Protective Custody” affirms the Arizona State Prison-Marana has not had any inmates at risk of sexual victimization who were held in involuntary segregation housing in the past 12 months from one to 24 hours nor has the facility had any inmates at risk of sexual victimization who were held in involuntary segregation housing in the past 12 months for longer than 30 days while awaiting alternate placement.

An interview with the Warden and staff supervising segregation indicated there have been no inmates housed in segregation involuntarily as the result of being a victim of sexual abuse or for having been at substantial risk of imminent risk of sexual victimization. They did indicate that if they did have an inmate victim or one at substantial risk of imminent sexual abuse the inmate probably would be placed in involuntary housing temporarily until the situation could be investigated and if there were no alternative means of keeping the inmate safe, he could be transferred to another facility for his protection. The same option is available for the alleged perpetrator.

The facility reported there have been no allegations of sexual abuse or sexual harassment in this facility for beyond the past twelve months.

Standard 115.51 Inmate reporting

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 19. Inmate Reporting, a)-e), addresses inmate reporting. MTC has established procedures allowing for multiple ways for inmates to report privately to MTC officials about sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. Additionally, MTC provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not a part of the agency. Inmates who are detained solely for civil immigration purposes are provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

Arizona Department of Corrections, Department Order, 125, Sexual Offense Reporting, 125.03, Intervention, instructs an inmate who is sexually assaulted to report it to a staff member. 1.4.1 of that same policy requires inmates who observe, are involved in or have knowledge of a sexual assault shall immediately report their observation to a staff member. It also

provides the following ways for inmates to report: 1) Inmate Letter; 2) Official correspondence through the US Mail; 3) PREA Hotline (when an inmate leaves a message on the PREA Hotline, designated staff in the Inspector General Bureau will receive an email alerting them a message was left) and 4) Third Party Reporting. 125.09, Confidentiality, affirms the Department encourages victims of unlawful sexual conduct to report the conduct and the Department encourages cooperation in its investigation and prosecution. The identity and dignity of the victim will be protected to the fullest extent possible. The Inmate Sexual Abuse Handbook, on page 5, "What to do if you are assaulted", advises the inmate to report it immediately to staff who will offer immediate protection from the assailant and refer the inmate to medical. It also advises the inmate he does not have to name other inmates or the staff member to receive assistance but that information makes it easier for staff to help the inmate. Page 6 of that handbook, "How to Report and Incident of Sexual Assault" informs the inmate it is important that he tell a staff member if he is assaulted. He is then advised he could tell the following: Inmate's Correctional Programs Officer, Chaplain, Psychologist, medical staff, security staff, the Warden or any other staff they trust. The inmate is informed staff have been instructed to keep the report information confidential and only discuss it with appropriate officials on a need to know basis. Other confidential means to report included: 1) Write an inmate letter to the Warden; 2) Write to the Office of the Inspector General (OIG) which investigates allegations of staff misconduct (address provided).

The Warden provided a memo dated July 15, 2016, "Inmate Reporting Sexual Abuse or Sexual Harassment" sent out to "All Inmate Population". It states, "the agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency." It also states if an inmate has concerns regarding sexual abuse or sexual harassment, the medical staff is available 24 hours a day, 7 days a week to address those types of issues and that reported concerns will remain anonymous upon request.

Another memo from the Warden, dated July 15, 2016, Inmate Reporting, confirmed that Arizona State Prison-Marana does not detain inmates solely for civil immigration purposes. Inmates at Marana are detained due to being sentenced to prison by the Arizona Criminal Court System for criminal charges.

The auditor interviewed 15 inmates, two of whom were gay and one disabled. The most common response related to reporting allegations of sexual abuse and sexual harassment was that most of the interviewed inmates would utilize the hotline to report an allegation of sexual assault or sexual harassment. They also related the following ways to report: 1) Inmate Letter Form 916-1; a form used to request a particular staff respond to an identified or reported issue; 2) Tell a staff and 3), tell a family member either on the phone or during visitation. Most believed if they reported it to a staff, they would take it seriously.

Interviews with the Warden, PREA Compliance Manager, randomly selected staff and specialized staff indicated inmates can make reports in the following ways: 1) Using the Inmate Phone System (phone calls go to Century Link, who forwards the calls to the Office of the Inspector General, after which the DOC CIU Investigator, receives an email to investigate the allegations); 2) Write the Inspector General (address provided); 3) Anonymously; 4) Write the Warden and drop it in his box; 5) Write the Contract Monitors and drop a note in their box; 6) Report via the Website; 7) Report in privacy at the Lieutenant's Office; 8) Report to a family member; 9) Report to the Warden when he is walking about or 10) Talk to the Warden at the Warden's "Town Hall" meetings with inmates.

Interviewed staff related they have been trained to accept any report, allegation or suspicion seriously and report everything immediately, verbally, followed by a written report not later than the end of the shift. They stated that an inmate may report verbally, in writing, anonymously and through third parties. Interviewed staff, including medical stated they have not had a report or allegation made during the past twelve months. MTC Policy 903E.02, Ensuring Safe Prisons, 19. Inmate Reporting, d) and e), mandates that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties with no exceptions.

PREA Posters throughout the facility remind inmates how to report.

Standard 115.52 Exhaustion of administrative remedies

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

Auditor 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.

MTC Policy, 903E.02, 20., Exhaustion of Administrative Remedies, a) through h), provides inmates with administrative procedures for dealing with inmate grievances regarding sexual abuse. MTC allows inmates to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the alleged incident is alleged to have occurred. MTC also does not require the inmate to use any informal grievance process or to otherwise attempt to resolve the issue with staff, for an alleged incident of sexual abuse. The grievance will not be referred to the staff member who is the subject of the complaint. Decisions on the merits of any grievance or portion of a grievance alleging sexual abuse will be made within 90 days of the filing of the grievance and MTC will notify the inmate in writing when the organization files for an extension, including notice of the date of the filing of the grievance. Third parties may assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Inmates may decline third party assistance in filing a grievance alleging sexual abuse. MTC documents the inmate’s decision to decline. Paragraphs g) and h) relate to emergency grievances. MTC has established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Each MTC facility is required to have a procedure for emergency grievances alleging substantial risk of imminent sexual abuse that require an initial response within 48 hours. Emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision is issued within five days. MTC has written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the facility demonstrates the inmate filed the grievance in bad faith.

MTC Policy, 503, Inmate Grievances, 3. Emergency Grievances, states once the receiving staff is approached by an inmate and determines that he/she is in fact raising an issue requiring urgent attention, emergency grievance procedures will apply. The emergency grievance is immediately reviewed by the Chief of Security of designee who is then required to decide if it is life threatening or requires immediate attention. If the Grievance Officer determines it is not, it is processed as a regular grievance. Emergency grievances are processed immediately if possible and not longer than 24 hours. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency immediately forwards the grievance (or any portion thereof that alleges the substantial risk) to a level of review at which immediate corrective action may be taken and provide an initial response within 48 hours and issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Arizona Department of Corrections, Department Order 802, Inmate Grievance Procedure, 802.08, Sexual Offense Grievance, requires that staff receiving an informal complaint or formal grievance at any level that describes activity that may be in violation of the Prison Rape Elimination Act (PREA) shall immediately initiate Department Order # 125, Sexual Offense Reporting and notify the shift commander who shall notify the unit Deputy Warden or Institution Warden. The policy addresses the following: 1) The Department does not impose a time limit when an inmate may submit a grievance regarding an allegation of sexual abuse; 2) The department may apply otherwise time limits to any portion of a grievance that does not allege an incident of sexual abuse; 3) The inmate does not have to use an informal process or to otherwise resolve the issue with the staff of an alleged incident of sexual abuse; 4) There is nothing in this section of the Department Order that restricts the ability of the Department to defend against an inmate’s lawsuit on the ground that applicable statute of limitation has expired; 5) The Grievance Coordinator shall ensure an inmate who alleges sexual abuse may submit the grievance without having to submit it to the staff who is the subject of the complaint. Final decisions are in compliance with the PREA

Standards. Section 1.3, Third Parties, provides that third parties, including fellow inmates, staff members, family members, attorneys and outside advocates are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of the inmate. The facility may require the inmate to agree to having a grievance filed on his behalf and if the inmate declines, it is documented. The Order also provides that the facility may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. 1.4, Emergency Grievances, requires that the Grievance Coordinator or staff member receiving an emergency grievance or informal complaint alleging an inmate is subject to a substantial risk of imminent sexual abuse is required to immediately forward the grievance or complaint or portion thereof that alleges the substantial risk of imminent sexual abuse to a level of review at which immediate corrective action may be taken. An initial response is provided to the inmate within 48 hours and the Warden or designee issues a final decision within five calendar days. The Warden or designee is required to document the initial response and final decision, the determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. Copies are to be forwarded to the Legal Services Unit and the Department PREA Coordinator. The Department may discipline an inmate for filing a grievance related to alleged sexual abuse only where the Department can demonstrate the inmate filed the grievance with malicious intent.

A memo from the Warden, dated July 15, 2016, Exhaustion of Administrative Remedies, reported that the facility has not had any grievances that were filed alleging sexual abuse.

Interviews with staff indicated they are aware of the grievance procedures and emergency grievance procedures. Inmates who were interviewed rarely mentioned the grievance process as a way they could report sexual abuse or sexual harassment. They stated they could file a grievance but it would not be their preference. None of the interviewed inmates reported having filed a grievance alleging sexual abuse and sexual harassment.

Standard 115.53 Inmate access to outside confidential support services

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

Auditor 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.

MTC Policy, 903#-02, Ensuring Safe Prisons, 21. Access to Outside Confidential Support Services, requires MTC facilities to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers (including toll free hotline numbers where available) for local, state or national victim advocacy or rape crisis organizations; giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes and enables reasonable communication between inmates and these organizations in as confidential manner as possible. MTC facilities inform inmates prior to giving them access to outside support services, the extent to which such communications will be monitored. MTC also is required to inform the inmate, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including the limits of confidentiality under relevant federal, state or local law. Additionally, the policy requires MTC facilities to maintain memoranda of understanding or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse. MTC also maintains copies and documentation of attempts to enter such agreements.

The Arizona State Prison-Marana PREA Compliance Manager discussed her attempts to enter into a Memorandum of Understanding with an outside advocacy organization. She also provided multiple documents confirming she has left no stone unturned in seeking out an outside organization capable of providing emotional support to inmates who have been the victims of sexual abuse. Contacts with multiple organizations were never responded to and one that did respond stated the facility would have to provide at least ten staff to attend training in order for them to offer a training for staff advocates. The Arizona Department of Corrections PREA Coordinator was contacted for suggestions on how to secure a MOU with an advocacy organization. The suggestion was to contact the Arizona Coalition to End Sexual and Domestic Violence. Contact was made and documented. This organization was unable to help and stated they would have to have ten staff to set up a training class for staff advocates. They suggested the Marana PREA Compliance Manager and staff watch the webinars provided by Just Detention International. Staff followed those instructions and staff watched webinars however following that webinar Just Detention explained they were unable to provide the advocate video during the webinar but acknowledged Marana staff watched the webinars provided. The facility has one staff who was trained to serve as a staff advocate. The provided certificate documented the staff completed the eight- hour workshop February 25, 2014. The training was provided by the Arizona Coalition to End Sexual and Domestic Violence. The facility provided additional documentation that they are attempting to secure a MOU with the Southern Arizona Center Against Sexual Assault located in Tucson, AZ.

Standard 115.54 Third-party reporting

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

Auditor 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.

MTC Policy, 903E-02, Ensuring Safe Prisons, 22. Third Party Reporting, a)-b) states MTC provides a method to receive third party reports of inmate sexual abuse or sexual harassment in accordance with MTC Policy and this information is publicly distributed on how to report inmate sexual abuse or sexual harassment on behalf of inmates. Arizona Department of Corrections Policy, Department Order 609, Criminal Investigations, 608.08, Sexual Assault, 1.1.3 describes actions to take upon receipt of a third-party report. In the reviewed Inmate PREA Handbook, Page 6, How to Report an Incident of Sexual Assault, Inmates are advised they may contact the Inspector General and instructions for contacting them are provided. Inmates are instructed they may write to the Inspector General Bureau in regards to staff sexual misconduct and/or staff sexual harassment and inmate on inmate sexual assaults. This may be in the form of an inmate letter or as an official correspondence through the US mail. Staff may not retaliate against the inmate for their correspondence and except for required investigations the report will be kept confidential. It also advises inmates they may file a grievance or report the behavior through other authorized channels if they so desire.

Staff consistently stated inmates can report allegations of sexual abuse and sexual harassment through third parties, including family members or other inmates. They also related they have been trained to take all allegations and reports seriously and if they received a third party report they would treat it like all other allegations of sexual abuse. Inmates who were interviewed generally did not mention third parties as a way they could report however when asked if another inmate, a family member or a volunteer could make a report on their behalf, they said they were sure they could and they believed staff would take it seriously. Inmates reported they have access to their families daily via the telephone and during visitation. They also related they could tell an attorney if they had one and could tell a contractor as well. Inmates told the PREA Audit Report

auditor that sexual assaults do not take place in this prison. They related the prison is referred to as Camp Snoopy. They indicated if there was sexual activity in this prison it was consensual. They knew that was against the rules too but stressed there is no coerced sexual activity in this prison. Inmates said they have access to the Warden and other staff as they walk about the facility, through dropping a note into their mailboxes in the facility. Many of the inmates work outside the facility and stated they could report outside the facility to third parties.

Standard 115.61 Staff and agency reporting duties

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

Auditor 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.

MTC Policy 903E-02, Ensuring Safe Prisons,²³ Staff and Agency Reporting Duties, requires all staff to report immediately and according to MTC Policy 203.10 Employee Discipline, 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 organization. Policy also requires staff to report immediately any retaliation against inmates or staff who report an incident of sexual abuse or sexual harassment and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Apart from reporting to the designated supervisors or officials and designated state or local services agencies, MTC prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Staff carry a first responder card with them. This card addresses staff reporting responsibilities. It requires that any instance of sexual assault or attempted sexual assault by staff or inmates shall be reported immediately and investigated in accordance with Department Order (AZ Department of Corrections) #608, Criminal Investigations.

Interviews with staff, randomly selected and specialized, as well as interviews with contractors, confirmed staff have been trained to report allegations of sexual abuse, sexual harassment and retaliation for reporting or for cooperating with an investigation into allegations of sexual abuse or sexual harassment. Staff related they are trained to report “everything” including any allegation, report, knowledge or even a suspicion. They stated they are trained, as well, to take reports from any source, including those reported anonymously and through third parties. Staff stated they are required to verbally report it immediately and complete a written report prior to the end of the shift. Staff reported ways they could report and most mentioned they would be sensitive to the need for confidentiality in reporting by telling the Lieutenant or Shift Supervisor in a private setting insofar as possible.

The Warden, in a memorandum dated July 18, 2016, reported the facility has not received any reports or allegations that an inmate was sexually abused in the past twelve months. Interviews with the Warden and PREA Compliance Manager confirmed there have been no allegations or reports of sexual abuse or sexual harassment in the past twelve months. None of the interviewed inmates stated they had experienced sexual abuse or sexual harassment while in this facility. They also consistently reported feeling safe and most stated voluntarily that “those things” do not happen in this facility.

Standard 115.62 Agency protection duties

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

Auditor 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.

MTC Policy, Ensuring Safe Prisons, 24. Agency Protection Duties, a) Agency Protection Duties, requires that when MTC learns that an inmate is subject to a substantial risk of imminent sexual abuse, MTC requires immediate action to protect the inmates (i.e. It takes some action to assess appropriate protective measure without unreasonable delay).

Staff, in their interviews, related in the event an inmate reported they were subject to a substantial risk of imminent sexual abuse, said they would immediately ensure the inmate was removed from the threat until a decision could be made concerning where the inmate could be placed to stay safe. Most stated the inmate would probably be placed in protective custody/administrative restrictive housing until the supervisors could investigate and determine where to house the inmate. The Warden, in an interview, related the inmate would be removed from that threat and placed in protective custody until an investigation could be conducted. Other options could be to transfer the inmate(s) posing the threat or transferring the inmate who does not feel safe in this facility. If an inmate was placed in protective custody, he would be given access to programming insofar as possible and if a privilege was denied, the reasons would be documented.

Every interviewed inmate reported feeling safe in this facility. Most said this prison is very “laid back” and calm and that there are no incidents of sexual abuse or sexual harassment here.

There have been no cases during the past twelve months resulting in an inmate being placed in protective custody as the result of being placed at substantial risk of imminent sexual abuse.

Standard 115.63 Reporting to other confinement facilities

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

Auditor 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.

MTC Policy, 903E-02, Ensuring Safe Prisons, 25. Reporting to Other Confinement Facilities, a) through c), requires that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency/facility where sexual abuse is alleged to have occurred and that this notification is within 72 hours after receiving an allegation and provide documentation of the notification. Policy also requires all allegations received from other facilities/agencies are investigated.

Interviews with the Warden and PREA Compliance Manager confirmed a reporting process consistent with the standards.

The facility has not had any allegations of sexual abuse from any other facility either reporting sexual abuse or sexual harassment that allegedly occurred at Marana or at another facility.

Standard 115.64 Staff first responder duties

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

Auditor 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.

MTC Policy, Ensuring Safe Prisons, 903E.02, Paragraph 26, Staff First Responder Duties, requires that upon learning that an inmate was sexually abused with a time frame that still allows for the collection of physical evidence, the first security staff member to respond to the report is required to 1) Separate the alleged victim and abuser 2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence 3) Instruct the victim not to take any actions that could destroy physical evidence, including washing, brushing his or her teeth, changing clothes, urinating, defecating, smoking, drinking or eating and 4) ensure that the alleged abuser does not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. If the first responder is non-security staff, he or she is required to instruct the victim not to take any actions that could destroy physical evidence and then notify security staff.

The facility provided power point slides taken from the PREA Training Curriculum addressing First Responding. Slide #6, Staff First Responder Duties, requires that upon learning that an inmate was sexually abused within a time period that still allows for the collections of physical evidence, the first security staff member to respond to the report is required to: 1) Separate the alleged victim and abuser 2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence 3) Instruct the victim not to take any actions that could destroy physical evidence, including washing, brushing his teeth, changing his or her clothes, urinating, defecating, smoking, drinking or eating and 4) 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. For non-security staff first responders the slide presentation teaches non-security staff to instruct the victim not to take any actions that could destroy physical evidence and then notify security staff. Samples of signed training rosters were provided for review. Staff are also provided a first responder card that provides readily accessible step by step instructions about what to do upon becoming aware of a sexual assault or sexual abuse.

Arizona Department of Corrections, Department Order 125, Sexual Offense Reporting, 125.03, Intervention, requires that to preserve evidence, the assaulted inmate should be instructed not to wash, brush their teeth, shower, urinate, defecate, smoke, eat, drink or change clothing prior to notifying mental health practitioners, investigators, facility chain of command or receiving medical evaluation. The Policy also requires the Department take immediate action on all allegations of sexual conduct. 1.2, requires staff who observe or become aware of sexual assault shall, if appropriate, intervene, separate the inmates and if, if necessary, initiate the Incident Command System, immediately notify the Shift Commander or have another staff make the notification. To protect the victim the notification is not to be made over the radio. Staff are required to separate the victim from other inmates for protection and to preserve the evidence. Staff must remain with the inmate. The victim immediately must be escorted for medical treatment and mental health assessment and at no time will staff leave the victim alone until evaluated by mental health. The crime scene is to be secured until the Criminal Investigations Unit Investigator arrives.

All interviewed staff, including security and non-security, easily articulated their responsibilities as first responders. Consistently they related they would immediately separate the alleged abuser from the alleged victim, notify their immediate supervisor, instruct the victim not to take any actions that might degrade or destroy the evidence, including changing clothing, showering, using the restroom, drinking or brushing their teeth, secure the scene and treating it as a crime scene, not allowing anyone to enter or leave until investigators arrived and ensure the victim was taken to medical. Some said the victim would be taken to the hospital for a forensic exam as well. Interviewed food services contractors, in an interview, articulated the steps of a first responder, including separating the inmates, calling a supervisor, protecting the crime scene and protecting evidence by not allowing the inmates to change clothing, shower, use the restroom or brush their teeth.

Standard 115.65 Coordinated response

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

Auditor 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.

MTC Policy, 903.02, Ensuring Safe Prisons, 27. Coordinated Response a), requires each facility to develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and facility leadership. Staff are required staff to follow the coordinated response plan after an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership.

The Arizona Department of Corrections, Department Order 125, Sexual Offense Reporting, 125.03, Intervention, provides specific responses required by staff, including medical, mental health and other responders, in response to a sexual assault. The reviewed facility specific Coordinated Response Plan-Sexual Abuse was comprehensive, specific and detailed. Potential ways staff learn that a sexual assault has occurred are listed. Identifying victims is discussed followed by procedures for staff intervention and investigation. The plan begins with procedures for staff intervention, evidence collection at the crime scene, evidence collection from the victim, evidence collection from the assailant, psychological services, monitoring and follow up, release preparation and continuing care and reporting to inmates, staff disciplinary sanctions, after action review and referral to outside agency for prosecution. The Warden, in a memo dated, July 20, 2016, affirmed that a PREA Sexual Assault Checklist will be implemented for any allegations or incidents of sexual abuse. The Sexual Abuse Checklist is in the Emergency Response Plans located in identified offices. The memo, states the shift commander will be responsible for completing the PREA Sexual Assault Checklist and shall include it with all reports associated with the incident (Significant Incident Report).

Interviewed staff from a variety of disciplines could relate their individual responsibilities in response to an incident of sexual abuse. This was true even of food services staff who articulated step by step what actions they would take as first responders.

There have been no allegations of sexual assault during the past twelve months.

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

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

Auditor 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.

This standard is rated non-applicable. A memorandum from the Warden, dated July 18, 2016, entitled, “Preservation of Ability to Protect Inmates from Contact with Abusers” affirms that the Arizona State Prison-Marana does not enter into collective bargaining agreements or other agreements at all. Interviews with the Warden and PREA Compliance Manager confirmed the facility has the ability to remove any staff member from contact with an inmate during an investigation of an allegation of sexual abuse, sexual harassment or retaliation for reporting or cooperating with an investigation into an allegation of sexual abuse or sexual harassment.

Standard 115.67 Agency protection against retaliation

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 28. Preservation of Ability to Protect Inmates from Contact with Abusers, a) through c), states MTC protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. Policy also requires MTC to designate staff members or charges departments to monitor for possible retaliation. The facility will employ multiple protection measures such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims and emotional support services will be offered for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Arizona Department of Corrections Department Order, 125, Sexual Offense Reporting 1.4, Retaliation, prohibits retaliation against inmates or staff by other inmates or staff for reporting staff sexual conduct or harassment and inmate on inmate sexual assaults. All reports or allegations of retaliation are required to be investigated and if the allegations are proven the staff/inmate will be disciplined.

A PREA Monitoring Retaliation Form was provided for review. The form contains the requirements for PREA Monitoring including the following: “For at least 90 days following a report of sexual abuse or sexual harassment, the agency shall monitor the conduct and treatment of inmates and staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any negative performance reviews or reassignments of staff. The agency continues to monitor for

retaliation beyond 90 days if the initial monitoring indicates a continuing need and an agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. Space is provided for documenting the date, time and location of the interview with the staff or inmate who might experience retaliation. Comments are provided as needed. Blocks below the comments section provide the monitor with items to be reviewing. These included: Disciplinary Reports, Housing Changes, Program Changes, Negative Performance Review and Reassignment. Immediate steps to remedy the situation are to be provided as indicated.

The interviewed retaliation monitor related the facility has a zero tolerance for any form of retaliation for reporting or making an allegation of sexual abuse or sexual harassment or for cooperating with an investigation. Once an allegation of sexual abuse or sexual harassment is made, the retaliation monitor contacts the alleged victim to inform them of the monitoring process and how to contact the monitor if needed. The monitor related the following things could be monitored if the retaliation involved an inmate: disciplinary reports, housing changes, work assignment changes or other movement changes. If the retaliation involved a staff, shift changes and performance appraisals might be monitored. Monitoring would last for 30, 60 and 90 days and even beyond if necessary. The retaliation monitor described a process consistent with the PREA Standards.

There have been no allegations of retaliation during the past twelve months because there have been no allegations of either sexual abuse or sexual harassment.

Standard 115.68 Post-allegation protective custody

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons-Prison Rape Elimination Act, 29. Post Allegation Protective Custody, indicates MTC may house inmates who are alleged to have suffered sexual abuse in restrictive housing for protective custody subject to the requirements of PREA. Arizona Department of Corrections, Department Order, 125, Sexual Offense Reporting, 1.3, addresses post allegation protection and 1.3.10, states, at the conclusion of the medical and mental health examinations, or upon return from the emergency room, reassign the inmate victim and the inmate suspect(s), if known to the "Complex Detention Unit" or a Protective Custody Unit Pending the outcome of a Protective Custody review and/or investigative process, if appropriate. The inmate victim and suspect are not to be housed in cells next to each other if they are placed in the same Protective Custody Unit.

Interviews with the Warden and other staff indicated an inmate might be initially placed in restrictive housing pending initial investigation if there were no other options at the time however the inmate would remain in restrictive housing until an alternative housing arrangement could be made. Inmates may request protective custody. The facility would document the reasons for placing the inmate into restrictive housing after considering all other alternatives.

The facility has not had any allegations of sexual abuse or sexual harassment during the past twelve months. This was confirmed through interviews with staff and inmates and a memo from the Warden dated, July 19, 2016, stating Arizona State Prison-Marana has not had any incidents/allegations of sexual abuse therefore segregated housing has not been used to protect inmates who alleged to have suffered sexual abuse.

Standard 115.71 Criminal and administrative agency investigations

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 30. Criminal and Administrative Agency Investigations a) through e), addresses the investigation process. When MTC investigators are involved, they are required to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims and alleged perpetrators and witnesses and review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, MTC investigators typically will turn such evidence over to outside investigators. MTC investigators will conduct compelled interviews only after consulting with the Warden, prior to seeking out prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. MTC will take appropriate steps to ensure that substantiated allegations of conduct that appear to be criminal are referred for prosecution and MTC retains all written reports pertaining to administrative or criminal investigation of alleged sexual assault or sexual harassment, for as long as the alleged abuser is incarcerated or employed by MTC, plus five years. Policy also requires that any state entity or DOJ component that conducts administrative or criminal investigations of alleged sexual assault or sexual harassment does so pursuant to the requirements of standard.

Arizona Department of Corrections, Department Order 125.01, Sexual Conduct and Sexual Assaults requires all allegations and incidents of sexual conduct to be investigated. Department Order 601, Administrative Investigations and Employee Discipline establishes procedures for conducting investigations of misconduct by employees, for temporary reassignment of an employee during an investigation and for review and disposition of completed investigations by approving authorities. Department Order 608, Criminal Investigations requires, that when a unit initially reports an assault in a Significant Incident Report and it is subsequently discovered through further investigation by Criminal Investigation Unit (CIU) investigators to have the elements of sexual assault/abuse, the Central Office Communications Center is notified by CIU to change or update the SIR to reflect sexual abuse. Arizona Department of Corrections Department Order, 125, Sexual Offense Reporting, requires upon becoming aware of an allegation or actual sexual assault incident, the shift commander is required to initiate the ICS and consult with the Criminal Investigations Unit. The Criminal Investigations Unit is responsible for conducting investigations of a criminal nature. Investigators in this unit have received specialized training in conducting sexual abuse investigations in confinement settings. CIU Investigators have also completed the required Peace Officer Standards Training and have arrest powers.

Following an investigation, a person found to have engaged in unlawful sexual conduct with an inmate or offender is subject to disciplinary action including dismissal and may be referred for criminal prosecution. Inmates who sexually assault another inmate are subject to disciplinary action as outlined in Inmate Disciplinary Procedures or referred for criminal prosecution. An interview with a Criminal Investigations Unit Investigator and a Facility Investigator confirmed a thorough investigative process. The investigation would begin as quickly as possible following notification and would include collecting evidence such as clothing, sheets, photos and any biological or other forensic evidence. Staff and inmate interviews would be conducted and any applicable video footage would be reviewed. The processes for conducting an investigation described by the investigators was comprehensive and specific and evidenced the investigators had an excellent knowledge and grasp of the investigative process. They indicated that if a staff resigns prior to the completion of an investigation or if the inmate is transferred to another facility the investigation process continues. They also described how they would investigate

anonymous and third party reports indicating the process would be the same.

Standard 115.72 Evidentiary standard for administrative investigations

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

Auditor 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.

MTC Policy 903.E.2, 31. Evidentiary Standards for Administrative Investigations a), requires a standard of proof of a preponderance of evidence or lower standard of proof in determining whether allegations of sexual abuse or sexual harassment are substantiated. This standard of evidence was confirmed in interviews with facility investigators. There have been no allegations of sexual abuse or sexual harassment during the past twelve months.

Standard 115.73 Reporting to inmates

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons 32. Reporting to Inmates, a) through d), requires that any inmate making an allegation that he or she suffered sexual abuse in an MTC facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded following an investigation by MTC. If an outside entity conducts such investigations, MTC requests the relevant information from the investigative entity in order to inform the inmate as to the outcome of the investigation. MTC will take appropriate steps to ensure that MTC subsequently informs the alleged victim whenever the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. MTC requires notifications are documented.

Arizona Department of Corrections, Department Order, 608, Criminal Investigations, 1.3, Notifications to Inmate Victims of Sexual Assault/Abuse, requires that following an investigation into an inmate's allegation that he suffered sexual abuse in a Department Facility, the Criminal Investigation Unit informs the inmate victim at the conclusion of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded and to document the case status and inmate victim notification or attempted notifications accordingly in the CIU database. Also, following an inmate's allegation that a staff member has committed a sexual offense against the inmate, unless the allegations were unfounded, the CIU is required to inform the inmate victim when the staff is no longer posted at the inmate's unit; the staff is no longer

employed at the facility; the staff has been indicted on a sexual offense or that the staff has been convicted of a sexual offense. Following an allegation of a sexual offense by another inmate, the CIU staff will inform the alleged victim whenever the suspect has been indicted on the sexual offense or convicted of a sexual offense. All notifications are required to be documented and the obligation to report terminates if the inmate victim is released from custody.

The Warden provided a memo dated, July 18, 2016, "Reporting to Inmates" affirming that Marana has not had any reports or complaints of sexual abuse within the past twelve months therefore there were no investigations of alleged sexual abuse completed. The memo affirms the Arizona Department of Corrections conducts all criminal investigations however if an outside agency were used to assist, the CIU would still be responsible for making notifications. There were no allegations of staff on inmate or inmate on inmate sexual abuse during the past twelve months.

An interview with a CIU investigator confirmed the notification process required by policy and the PREA Standards.

Standard 115.76 Disciplinary sanctions for staff

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, 34. Corrective Action for Contractors and Volunteers, a)-c), requires that any contractor or volunteer who engages in sexual abuse is prohibited further contact with inmates and requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal and to relevant licensing bodies. Facilities take remedial measures and prohibit further contact with inmates in the case of any other violation of MTC sexual abuse or sexual harassment policies by a contractor or volunteer. The facility provided a memo from the Warden affirming there have been no sexual assault/abuse incidents in the last 24 months involving contractors or volunteers at this facility.

The Warden related, in an interview, that if a volunteer or contractor were alleged to have been involved in sexual abuse or sexual harassment the volunteer or contractor would be prohibited from entering the facility and if the allegations were substantiated, they would be permanently barred and referred for prosecution.

Standard 115.77 Corrective action for contractors and volunteers

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, 33. Disciplinary Sanctions for Staff a) through c), affirms staff engaging in sexual abuse/sexual harassment against inmates are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Disciplinary sanctions for violations of MTC policies relating to sexual abuse/sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's history and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of MTC sexual abuse/sexual harassment policies or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal and to any relevant licensing bodies.

Arizona Department of Corrections Department Order, 125, Sexual Offense Reporting, 1.8, requires Wardens to temporarily remove staff under investigation for staff unlawful sexual conduct from contact with inmates pending final resolution of the investigation. The removal may entail reassignment or Administrative Leave with pay in accordance with applicable Department Orders and is documented in writing.

Staff involved in allegations of sexual abuse or sexual harassment may be placed on no contact status, moved to another dorm or living unit or placed on administrative leave until the investigation is concluded. If the allegations are substantiated the employee would be recommended for termination and referred for prosecution.

There were no substantiated allegations of sexual abuse or sexual harassment by a staff during the past twelve months. The Warden related staff would be terminated if an allegation of sexual abuse was substantiated.

Standard 115.78 Disciplinary sanctions for inmates

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 35. Disciplinary Sanctions for Inmates, a) through h), prohibits all sexual activity between inmates and disciplines them for such activity. The policy also states inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse as well as following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are disciplined for sexual conduct with staff only upon a finding that the staff member did not consent to such contact. MTC offers therapy, counseling or other interventions designed to address and correct underlying reasons and motivations for abuse and considers whether to require the offending inmate to participate in such interventions.

Arizona Department of Corrections Department Order, 125, Sexual Offense Reporting, 1.3 requires that an inmate who sexually assaults another inmate is subject to disciplinary action as outlined in the Inmate Discipline Procedures. The actions are to be treated as Major Violations with the sternest sanctions imposed. Too, the inmate shall be classified to the highest custody level.

The Warden related the inmate would be disciplined through the inmate disciplinary code and referred for prosecution if an allegation of sexual abuse was substantiated.

Standard 115.81 Medical and mental health screenings; history of sexual abuse

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 36. Medical and Mental Health Screenings for History of Sexual Abuse, a) and b), requires all inmates who have disclosed any prior sexual victimization during a screening to be offered a follow-up meeting with a medical or mental health practitioner and MTC requires facilities to take appropriate steps to ensure that the follow-up meeting is offered within 14 days of the intake screening. MTC’s medical staff maintain secondary materials documenting compliance with the required services. The same is to be offered for inmates who ever previously reported previously perpetrating sexual abuse.

Arizona Department of Corrections Department Order, 125.06, Mental Health Services, provides a process for mental health screening during the initial mental health assessment. Inmates reporting they have experienced sexual victimization, whether it occurred in an institution setting or in the community shall be scheduled to meet with a mental health practitioner within 14 workdays of the assessment being completed. The same process applies to inmates reporting they have perpetrated sexual abuse. Policy goes on to address an inmate victim of sexual abuse by requiring that any inmate who is the victim of staff sexual misconduct, staff sexual harassment or inmate on inmate sexual assault is offered mental health services or assistance in recovery and protection from further incidents of misconduct and sexual assaults. Mental Health Services will make referrals for long term continuity of care and treatment for victims and document the referral in the inmate’s medical records. Policy also requires institutions conduct a mental health evaluation of all known inmate on inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Interviews with staff who conduct vulnerability assessments, medical staff and mental staff confirmed that if an inmate reports prior sexual victimization they are referred for a follow-up with mental health within 14 days. Additionally, the Health Services Administrator provided a PREA Management Log for review. This form documents inmates who have reported prior sexual victimization or prior abuse as well as inmates scoring a determined score on the risk screening instrument. Emergency Medical Treatment and Mental Health Crisis Intervention is documented as applicable. Follow-up after the initial contact with the inmate is recorded within 30 days of the initial contact for offering mental health follow-up. Review of this document confirmed that every inmate who reported prior victimization was seen for an initial crisis intervention (offering mental health services) within 14 days after disclosing the prior sexual abuse. Follow-up was also documented as required. This follow-up after 30 days by the psychologist exceeds the requirements of this standard. An interview with the psychologist confirmed he sees inmates reporting prior victimization twice offering services. He sees them within the required 14 days initially and follows up within 30 days.

There were no inmates reporting they have previously sexually abused anyone.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)

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

Auditor 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.

MTC Policy, 903E.02, 37. Access to Emergency Medical and Mental Health Service requires MTC’s medical and mental health staff to maintain secondary materials documenting the time frames of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. These services are provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Arizona Department of Corrections Department Order, 125.04, Health Services, specifies actions for medical staff to take when an inmate victim of sexual abuse arrives at medical. These include assessing and providing any necessary emergency care and treatment. Health staff are required to evaluate the inmate and, if necessary, make arrangements with security staff for the inmate to be escorted to an outside medical facility or emergency room for treatment and collection of evidence. Health care staff will also ensure emergency treatment of the inmate is not delayed for administrative reasons. The Contracted Facility Health Administrator will coordinate the collection of evidence with the CIU and determine if hospital based treatment is necessary. Mental Health services, as specified in Arizona Department of Corrections Policy, 125.08, Mental Health Services, provides that an inmate who is the victim of staff sexual misconduct, staff sexual harassment or inmate on inmate sexual abuse is offered mental health services or assistance in recovery and protection from future incidents of misconduct and sexual assaults. Long term referrals are made if needed. Policy requires, upon notification an inmate has allegedly been sexually assaulted, mental health staff are required to evaluate the inmate as soon as the inmate’s physical evaluation and treatment allows and determine if a suicide or mental health watch is necessary. If after normal duty hours, the Mental Health Urgent Responder is contacted. Mental health follow-up consistent with the inmate’s needs are provided for individuals who are victims of sexual assault, as appropriate, by mental health practitioners. An interview with the facility health service administrator confirmed inmates alleged to have been the victims of sexual abuse would be treated on site for any trauma related injuries requiring immediate attention and sending the inmate to the hospital for a forensic exam. Mental health offers crisis intervention counseling and follow-up as needed upon return to the facility. This was confirmed through an interview with a facility mental health professional.

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

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

Auditor 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.

MTC Policy, 903E.02, Ensuring Safe Prisons, 38. Ongoing Medical and Mental Health Care for Sexual Abuse Victims and

Abusers a) through e), states MTC facilities offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Inmate victims are offered tests for STIs. A mental health evaluation of all known inmate-on-inmate abusers is conducted within 60 days of learning of such abuse history and treatment offered when deemed appropriate by mental health practitioners. There have been no sexual assaults at the facility reported during the past twelve months. Arizona Department of Corrections Department Policy also addresses follow-up medical and mental health services for victims of sexual abuse and for abusers.

Standard 115.86 Sexual abuse incident reviews

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

Auditor 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.

MTC Policy, 903.02, requires a review after every sexual abuse investigation, and ordinarily within 30 days of concluding the investigation, unless the allegation has been determined to be unfounded. MTC Teams consist of upper level management and allows for input from line supervisors, investigators, and medical or mental health practitioners. The incident review team considers all of the items addressed in the PREA Standards. The PREA Compliance Manager is a member of the incident review team.

The Warden provided the auditor a Memo, dated July 21, 2016 identifying the staff who are participate in reviewing sexual incidents. These included the Warden, Chief of Security, Health Services Administrator and Programs Administrator/PREA Compliance Manager with input from line supervisors, investigators and medical/mental health practitioners. Interviews with the Warden, PREA Compliance Manager, Investigator and other upper level staff, confirmed that an after-action review would be conducted within 30 days for every substantiated and unsubstantiated allegation of sexual abuse. They were also able to articulate a process consistent with the requirements of the standard and MTC Policies.

A memo dated July 21, 2016, from the Warden, affirmed the responsibility of the incident review team to conduct a review at the conclusion of every sexual abuse investigation. The team would prepare a report of findings based on all information available and the report would include recommendations for improvement and would be submitted to the Warden, PREA Compliance Manager and to the MTC Corporate Office. The team would also implement the recommendations for improvement or document the reasons for not doing so. There have been no allegations of sexual abuse during the past twelve months therefore there has not been an occasion to conduct an incident review.

Standard 115.87 Data collection

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

Auditor 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.

MTC Collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions as required by MTC Policy, 903E.02, Ensuring Safe Prisons. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. MTC aggregates the incident-based sexual abuse data at least annually and generates a comprehensive and informative annual report. Each MTC Facility is required by policy to maintain, review and collect data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews.

Interviews indicated MTC has a very sophisticated data system enabling the company to collect and report accurate data to answer all questions on the Survey of Sexual Violence and the system is set up to answer them sequentially. Additionally, the system has the capability for generating valuable reports including the following: PREA Allegations and Investigations Summary Report, PREA Allegations and Investigations Report by Site, Investigations by Facility, Master Investigation Log, Master Investigation Log by Site and others.

The reviewed 2015 MTC Annual Report was comprehensive and detailed and included Demographics of MTC Operated Facilities as well as detailed PREA Data. A chart of PREA Allegations and Investigations Results for 2015 within MTC operated facilities compared allegations from 2013 and 2014. An assessment of the agency's progress discusses potential reasons for increased allegations for 2014 and 2015 (allegations between 2014 and 2015 increased by 16 allegations) as well as on-going efforts to continue to ensure sexual safety in all its facilities. The report analyzes the data and considers potential reasons for the slight "uptick" in allegations.

Standard 115.88 Data review for corrective action

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 41. Data Review for Corrective Action, a)-d), requires MTC to review data collected and aggregated pursuant to 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies and training, including the following; 1) Identifying problem areas 2) Taking corrective action on an ongoing basis and 3) Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. The annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of MTC's progress in addressing sexual abuse. With approval of the respective customer agencies, MTC makes its annual report readily available to the public at least annually through its website. Annual reports are approved by the head of MTC. MTC's annual report does not redact material from its annual report because identifying material is never included. If material was redacted, the agency would limit that to specific materials where publication would present a clear and specific threat to the safety and security of the facility. MTC would indicate the nature of material redacted.

The facility conducts administrative incident reviews (After Action Reviews) after each investigation resulting in a finding of
PREA Audit Report

either substantiated or unsubstantiated. The facility inputs this information into the company's database enabling the company to generate multiple reports related to PREA. This information is used then as a management tool. The reviewed annual report for 2015 contained a summary of facility reports for 2015. This information was collected from sexual abuse incident reviews following an investigation finding of either substantiated or unsubstantiated. The review indicated there was generally no need to change policy or practices; motivations were typically not motivated by gang affiliation, status or other group dynamics; physical barriers were not seen as enabling abuse; staffing levels were considered adequate and although there was typically no need for additional monitoring technology, some Texas Department of Criminal Justice contracted sites commented on work requests that were pending or in progress to make specific modifications to TDC owned facilities.

Interviews with both the Agency's PREA Coordinator and Assistant PREA Coordinator confirmed how the company collects data and uses that data to make management decisions and to continuously review data coming in from each MTC Facility. This sophisticated data base enables management to identify potential problem areas in specific facilities as well as results for the company as a whole. Additionally, that system enables management to track investigations, notifications and incident reviews.

Standard 115.89 Data storage, publication, and destruction

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

Auditor 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.

MTC Policy 903E.02, Ensuring Safe Prisons, 42. Data Storage, Publication and Destruction, a) – c), states MTC ensures that incident based and aggregate data are securely retained; that MTC aggregates sexual abuse data from MTC facilities under its direct control and makes that information, after removing all personal identifiers, readily available to the public at least annually through its website. Information and data collected pursuant to 115.87 is maintained for at least 10 years after the date of initial collection, unless federal, state or local law requires otherwise.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Robert Lanier

March 5, 2017

Auditor Signature

Date