PREA AUDIT REPORT ☐ Interim ☑ Final ADULT PRISONS & JAILS

Date of report: October 4, 2017

Auditor Information				
Auditor name: Wynnie Testamark				
Address: 16920 NW 19 th Avenue				
Email: wynnie@bellsouth.	net			
Telephone number: 786-	-258-4951			
Date of facility visit: Aug	gust 15 – 17, 2017			
Facility Information				
Facility name: Cheyenne	e Mountain Re- Entry Center (CM	1RC)		
Facility physical address	s: 2925 E. Las Vegas St., Colora	do Springs,	Co. 80906	
Facility mailing address	: (if different fromabove)			
Facility telephone numb	per: 719-390-0125			
The facility is:	☐ Federal	☐ State		☐ County
	☐ Military	☐ Municip	oal	☑ Private for profit
	☐ Private not for profit			
Facility type:	☑ Prison	□ Jail		
Name of facility's Chief	Executive Officer: Steve Hartle	ey .		
Number of staff assigne	ed to the facility in the last 12	months: 2	57	
Designed facility capaci	ty: 720			
Current population of fa	acility: 675			
Facility security levels/i	inmate custody levels: Medium	/Minimum		
Age range of the popula	ntion: 21 - 77			
Name of PREA Compliance Manager: Mike Leewaye Title: Captain				
Email address: Mike.Leewaye@cecintl.comTelephone number: 719-390-0125				
Agency Information				
Name of agency: The GE	EO Group, Inc.			
Governing authority or	parent agency:			
Physical address: One Pa	ark Place, Suite 700, 621 Northy	west 53 rd St	reet, Boca Raton Flo	rida 33487
Mailing address: (if differ	rent from above) Click here to enter	text.		
Telephone number: 561	-999-5827			
Agency Chief Executive	Officer			
Name: George C. Zoley			Title: Chairman of t	the Board, CEO and Founder
Email address: gzoley@g	geogroup.com		Telephone number	r: 561-893-0101
Agency-Wide PREA Coo	rdinator			
Name: Phebia L. Moreland Title: Director, Contract Compliance, PREA Coordinator				
Email address: pmoreland@geogroup.com Telephone number: 561-999-5827				

AUDIT FINDINGS

NARRATIVE

The PREA audit of Cheyenne Mountain Re-Entry Center (CMRC), was conducted on August 15 – 17, 2017 by Wynnie Testamark, Department of Justice Certified PREA auditor.

Agency wide and facility specific supplemental documentation was mailed to me via FedEx Mail, which was received, on July 31, 2017. The documentation arrived in digital format (on a flash drive). The documentation consisted of agency policy, facility procedure responding to policy, samples of supporting documentation responding to each standard and the completed Pre-Audit Questionnaire. Prior to the audit, the facility was provided with a memorandum noting the scheduled date of the facility tour and my contact information to be posted throughout the facility for offender and staff to view. The facility tour was scheduled for, and conducted on, August 15 - 17, 2017.

An extensive facility tour was conducted, all areas of the facility were toured, and I was also able to interact with both staff and offenders at this time. Additional areas toured were, Restrictive Housing Unit (RHU), medical, intake, reception screening, central control, recreation, laundry, kitchen/offender dinning, library, program areas and various work areas. I had the opportunity to observe the operations of the facility, and the interaction between staff and offenders.

Following the tour, I began to interview random offenders and staff; as well as specialized staff and any specialized offenders present at the facility during the time of the audit. Interviews were conducted in areas of relative privacy. Everyone interviewed participated willingly and appeared to have a good understanding of the PREA standards and the agency's response and requirements regarding the standards, zero tolerance and reporting. Offenders had a thorough understanding of their right to be free from abuse and harassment and everyone knew the appropriate channels in which to report allegations.

I reviewed the documentation provided by the facility prior to the facility visit. During the tour, I was able to randomly review additional documentation throughout the facility in order to verify the samples provided were consistent with regular facility practice. This included viewing postings, investigative files, offender files, employee personnel files, medical and mental health files and training documentation for staff, contractors and volunteers.

I then met with the Director and the Administrative team, as well as representatives from all areas of the facility. Representatives from The GEO Group Headquarters were also present throughout the audit tour, including entrance and exit interviews.

Cheyenne Mountain Re-Entry Center does not house youthful offenders.

A total of 65 random inmate interviews were conducted.

A total of 30 staff interviews were conducted.

At Cheyenne Mountain Re-Entry Facility, staff works three (3) eight hour shifts (6a X 3p), (2p X 11:00p), (10p X 7a), with a Shift Captain and Lieutenant overseeing the daily operations. Video surveillance is monitored from the Main Control Center.

All specialized staff was interviewed except SANE/SAFE personnel. All SANE/SAFE exams are performed at either one of the local hospitals: Memorial Central Hospital or Penn Rose Hospital.

There was one sexual assault/harassment allegation case, reported within the past 12 months.

There were 675 offenders housed at the facility on the day of the audit. All of the offenders are in the custody of Colorado Department of Corrections.

I concluded the site visit with an exit interview with the Director, Administrative Staff and GEO Corporate Staff. I commended everyone on the great job of training staff and informing offenders concerning the agency's zero tolerance regarding sexual abuse and sexual harassment, as well as implementing the various standards applicable to the facility. The overall audit process was explained and an overview of the findings was presented. The findings were summarized and recommendations discussed.

DESCRIPTION OF FACILITY CHARACTERISTICS

Cheyenne Mountain Re-entry Center (CMRC) is located at 2925 E. Las Vegas Street, Colorado Springs, Colorado. CMRC is operated by GEO Group and is under contract with the Colorado Department of Corrections (CDOC).

CMRC is a 125,000 square foot building with four levels.

The lower level consists of the Medical Department, which operates 16 hours a day and on-call after hours. Food Service, Lecture Hall, Canteen, Barber shop and Gymnasium, Laundry, Mailroom, Maintenance, Intake, Restricted Housing Unit, Shift Supervisor Office, Chaplain, GED, Pre-Release, and VocEd. The Restricted Housing Unit (RHU) consists of 48 beds, 20 double bunk and 8 single cells. Offenders are not double bunked without express permission from CDOC Private Prison Monitoring Unit (PPMU).

The first floor consists of Administration, Lobby, Master Control, Roll Call, Visitation, Library / Law library, Programs Room, and two (2) living units. Housing unit 1B is an 80 bed housing DUI offenders Unit 1A is a 104 bed housing Sex Offender and the Incentive unit. The rooms are dormitory style with 6 and 8 man rooms with shared bathroom. The shower room is communal style with partitioned stalls for privacy.

The 2nd level is all living units housing 136 offenders per side; unit 2A is the Technical Parole Violator Unit (TPV) and unit 2B is General Population. With Communal Bathrooms and Showers. The rooms are dormitory style with 8 and 12 man rooms.

The 3rd level is identical to the 2nd level and housing General Population offenders.

Cheyenne Mountain Re-Entry Center (CMRC) employs 257 full time professionals. CMRC staff comprise of Security, Medical, Mental Health, Maintenance, Food Service Workers, Case Managers and Administrative Support employees.

The facility houses male offenders who are in the custody of Colorado Department of Corrections (CDOC).

The current average daily population is 650.

SUMMARY OF AUDIT FINDINGS

The PREA Audit for Cheyenne Mountain Re-Entry Center, (CMRC) was conducted on August 15 - 17, 2017 by

Wynnie Testamark, Department of Justice Certified PREA Auditor.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

	Exceeds Standard (substantially exceeds requirement of standard)
Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
	Documentation received and reviewed: AR 100-40, CEC Organizational Chart, CEC PREA Policy 1200.06, CEC PREA Policy 1200.06 Zero Tolerance, and Facility PREA Coordinator duties.
	The policy mandates zero tolerance toward all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting, and responding to such conduct. The policy further defines all prohibited acts.
	The CMRC employs a Facility PREA Compliance Manager, who has indicated that he has the time, resources, and authority to perform his duties as the facility's oversight for implementation of the PREA Standards. An organizational chart and a duty statement for the Facility PREA Compliance position, along with the interview provides support that the agency, including the facility, meets the requirements of section (b) of this standard. Onsite interviews as well as questioned staff members on its content and applicable sections to their specific duties within the facility confirmed compliance.
	Based on the above CMRC is in compliance with standard.
ard 11	Exceeds Standard (substantially exceeds requirement of standard)
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	Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	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)
	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) Does Not Apply
	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) Does Not Apply The facility does not contract for the confinement of inmates. The facility has not entered into any contracts for the confinement of inmates; therefore, this standard does
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□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (requires corrective action) Does Not Apply The facility does not contract for the confinement of inmates. The facility has not entered into any contracts for the confinement of inmates; therefore, this standard does not apply. 15.13 Supervision and monitoring

Documentation provided by the agency and reviewed: CEC PREA Policy 1200.06 Unannounced Rounds, CEC PREA Policy 1200.06 Supervision and Monitoring, AR 100-19, and AR 100-40.

The facility, CMRC has developed a staffing plan to provide adequate levels of staffing, and where applicable, video monitoring, to protect offenders against sexual abuse and sexual harassment. During my interviews I determined that the facility layout, composition of the resident population, any incidents of sexual abuse or sexual harassment, and any other relevant factors were utilized in developing the staffing plan.

It is the general practice for CMRC facility to review the staffing plan, at least monthly. Any request for additional staffing, electronic monitoring equipment or upgrades is identified at these meetings. The facility is currently 25 security staff short. The shortage is backfilled with overtime. During the past 12 months, CMRC has deviated from its staffing plan four (4) times and have written justification.

The agency's PREA Policy 1200-06, Unannounced & Supervision Security Rounds, requires that shift supervisors to conduct regular unscheduled security checks to identify and deter sexual violence, staff sexual misconduct and sexual harassment of any kind. These security checks are documented in the Daily Staffing Report (DSR). The DSR provide the date, time and location the security round was conducted.

During the facility tour it was also verified that appropriate supervisors on all shifts were conducting and documenting required security rounds. This was evidenced by DSR entries reviewed. Additionally, all of the supervisors interviewed were able to articulate a method in which to conduct unannounced rounds in a manner that would prevent staff from being able to alert other staff of the rounds being conducted.

The Administration works to continuously improve staff and supervisory presence in order to prevent and detect sexual abuse and harassment and maintain overall security of the facility.

Based on the above CMRC is in compliance with standard.

Standard 115.14 Youthful inmates

Ш	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)	
	Does Not Apply	
	CRMC does not house inmates under the age of 18. Therefore this standard does not apply.	
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)	

Documentation provided by the agency and reviewed: CEC PREA Policy 1200.06 Cross Gender Viewing and Searches, Cross Gender Pat Search Curriculum, Pat Search Training Curriculum, Opposite Gender Sign, Strip Search Log, AR 100-40, AR 100-40IA, AR 300-56, AR 100-700-14, AR 100-700RD, and AR 100-29.

All showers and bathroom stalls have curtains providing the inmates with privacy.

During the interviews with staff, they related that they understood the policies on announcing their presence as well as pat searches. They also understood the policies as they pertain to transgender or intersex residents and determining their sex. All of the staff interviewed indicated that they had received training on cross gender pat down searches, and searching of a transgender resident, this was confirmed by viewing their training logs.

The facility does not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If exigent circumstances existed all staff interviewed understood that gender should be determined through conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

The facility has not conducted cross-gender strip searches and visual body cavity searches during the past 12 months. This was confirmed during the interviews with both random staff and inmates.

The facility has not housed a transgender or intersex resident within the last 12 months.

During the inmate interviews they confirmed that female staff, make announcements upon entry to the housing areas.

This facility does not house female inmates; therefore, sections (b and c) of this standard do not apply.

Based on the above CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100-40, AR 100-19, CEC PREA Policy 1200.06 Disabilities, CEC PREA Policy 1200.06 Interpreters, Inmate Video Curriculum, and Intro to PREA PPT.

CMRC has in place the appropriate steps necessary to ensure inmates with disabilities have equal opportunity to participate in or benefit from all aspects of the agency's efforts. Agency policy states that the department shall not rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the offender's allegations.

During the classification of the inmates, staff identifies any issues concerning disabilities and takes the appropriate actions needed to protect the inmates.

Compliance in this area was determined by reviewing policies and procedures of the facility. During the random staff interviews It was determined that they all understood the availability of interpreters (language line), and further understood the importance of not utilizing inmates for interpretation during any incident.

At the time of the audit no disabled or non-English speaking inmates were being housed.

A copy of the PREA posters and handouts in both English and Spanish was provided. CMRC has posted the proper signage on PREA; these signs are in both English and Spanish.

Based on the above CMRC is in compliance with standard.

Standard 115.17 Hiring and promotion decisions

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

Documentation provided and reviewed: CEC PREA Policy 1200.06 Hiring, Promotion and Background, New Hire Background, PREA Background Screening Procedure, AR 100-40, AR 1150-17, and 2016 & 2017 Contractor Background Checks.

Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Also, requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Furthermore, CRMC policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

During the interview with Human Resources Manager, PREA Compliance Manager, and documentation provided; I confirmed that background checks are being completed during the initial hiring process. The facility is currently 25 security staff short. The shortage is backfilled with overtime.

During the past 12 months, CMRC hired seven (7) people who may have contact with inmates who have had criminal background record checks.

Based on the above CMRC is in compliance with standard.

Standard 115.18 Upgrades to facilities and technologies

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

Documentation provided and reviewed: CEC PREA Policy 1200.06 Facility Upgrades, and 2015 Video Camera Upgrade.

CMRC utilizes fixed wing digital video recorders and DVR systems. Each housing unit as well as the Control Room entrance lobby and exit area, chapel, visiting, food service and all classrooms are monitored by video systems. The retention of the videos is 30 days. An officer monitors all cameras in the Control Room, and the cameras can also be viewed in the Director and Deputy Director's office.

In addition, security mirrors were installed strategically throughout the facility to enhance security and the safety of inmates and staff.

CMRC is currently planning an upgrade of their camera system.

Based on the above CMRC is in compliance with standard.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Documentation provided and reviewed: AR 100-40, AR 700-30, AR 1150-07, AR 1150-18, CEC PREA Policy 1200.06 Evidence Protocol and Forensic Medical Exam.

At CMRC, Colorado Department of Corrections OIG conducts the criminal investigations and CMRC staff are authorized and trained to conduct administrative investigations. Both agency personnel receive specialized training to solely conduct investigations, including sexual abuse allegations. A Memorandum of Understanding has been implemented with T.E.S.S.A via CDOC is dated May 27, 2016.

CMRC policy also states that all rape crisis center advocates or qualified community-based organization staff members must clear a background check and attend basic volunteer training prior to entering any facility. In addition, rape crisis center advocates and qualified community-based organization staff members will be screened for appropriateness to serve in this role and will receive education concerning sexual abuse, sexual assault and forensic examination issues in general.

In the event there's an incident or allegation; arrangements are made by CDOC OIG to transport offender to the local hospital (Penn Rose Hospital or Memorial Central Hospital), where a Sexual Assault Forensic Examiner (SAFE), Sexual Assault Nurse Examiner (SANE) for forensic examination will be conducted. Additionally, victim advocates are provided there and sexual assault examinations, including mental health services necessary to treat the offender will be provided without costs.

All of the staff interviewed understood their responsibility in the preservation of evidence, and how to preserve a crime scene. In addition, interviews with random inmates supported the information has been posted and the inmates have knowledge of the type of help they can receive.

During the past 12 months, there have been zero (0) forensic medical exams performed by SANE/SAFE

and/or conducted.

Based on the above CMRC is in compliance with standard.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Investigation, CEC Report Instructions, CEC Incident Report, Agency Website.

Agency policies require an administrative or criminal investigation must be completed for all allegations of sexual abuse and sexual harassment.

Every allegation is referred to the CDOC OIG for investigation. OIG staff conduct all criminal investigations and information regarding agency policy is published on the Department's website. OIG is responsible for determining which allegations of staff misconduct warrant a criminal investigation and for completing all investigations in a timely and through manner. This was verified during the interviews with the CMRC Director and the OIG investigator, along with the responses from other random staff.

During the past 12 months, there were one (1) allegation of sexual abuse and sexual harassment that were received; one (1) allegation resulting in an administrative investigation, and one (1) allegation referred for criminal investigation.

This was verified through interviews with OIG - DOC staff, PREA Compliance Manager, CMRC Director, and review of the training attendance log report, and investigative files.

Based on the above, CMRC is in compliance with standard.

Standard 115.31 Employee training

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

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Employee Training, Ethics

Hotline, PREA Training Curriculum, 2016 & 2017 New Hire Training Records.

All of the random staff interviewed also indicated that they had received PREA training and receive it annually during their block training. All were able to recite the agencies zero-tolerance requirement as well as their responsibilities as they relate to PREA. Training records were supplied which indicated compliance by documenting the training received for each staff member.

I viewed the PREA Training and training records, for staff, volunteers and contractors.

The training is tailored to the gender of inmates at CMRC facility.

There were 128 CRMC employees in the past 12 months, assigned to the facility that was trained on the PREA requirements.

In the past 12 months, CRMC had 510 employees assigned to the facility that were trained or retrained on the PREA requirements since the last audit.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100-40, AR 900-01, CEC PREA Policy 1200.06 Volunteer, Contractor Training, and Contractor/Volunteer Training Curriculum, and Volunteer lists and training acknowledgment.

It was confirmed that all volunteer and contractor training were conducted. Training logs were viewed and verified.

During the past 12 months, CMRC has trained 334 volunteers in agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response.

Based on the above, CMRC is in compliance with standard.

Standard 115.33 Inmate education

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

Documentation provided and reviewed: Inmate Orientation Video, CEC PREA Policy 1200.06 Resident Education, AR 100-40, PREA Posters (English & Spanish), and PREA Policy, Resource Guide, and Zero

Tolerance Policy Acknowledgment Forms.

During the intake process, inmates receive information explaining CMRC's zero- tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment via video.

CRMC provides a comprehensive education to inmates through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

CRMC provides inmate education accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Documentation of inmate participation in these education sessions was provided.

Randomly selected inmates were interviewed and presented as knowledgeable in agency PREA policy. All were aware of the contact information located throughout the facility and were provided PREA specific Literature/Video presentation during initial processing and upon arrival at CMRC.

There were 1,512 inmates admitted into CMRC during past 12 months who received initial and comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

Based on the above, CMRC is in compliance with standard.

Exceeds Standard (substantially exceeds requirement of standard)

Standard 115.34 Specialized training: Investigations

	,
Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
	Documentation provided and reviewed: AR 100-40, AR 1150-04, CEC PREA Policy 1200.06 Specialized Training for Investigators, Lesson Plans for Investigators, Investigator Interview Lesson Plans, Investigator Training PPT, Investigator Training Acknowledgment Form, and Agency Investigator List.

Agency provided the required training for investigators. This training meets the expectations of the standard and provides the recipient with the needed skills to conduct investigations in a confinement setting.

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

This was verified through interviews with OIG - DOC staff, PREA Compliance Manager, CMRC Director, and review of the training attendance logs report issued on May 31, 2016.

During the past 12 months, 85 investigators completed the required specialized training for the agency.

Based on the above, CMRC is in compliance with standard.

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	L5.35 Specialized training: Medical and mental health care
	Exceeds Standard (substantially exceeds requirement of standard)
Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
	Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Specialized Training for Medical and Mental Health Care, Lesson Plans for Medical, Lessons Plans for Mental Health, 2016 & 2017 Medical and Mental Health Training Logs, Acknowledgment Forms, PREA Training completion report, and Mental Health Services for Sexual Trauma.
	CMRC ensures that all medical and mental health care practitioners have been trained in how to: detect and assess signs of sexual abuse and sexual harassment; preserve physical evidence of sexual abuse; respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
	CMRC maintains documentation that medical and mental health practitioners have received the training.
	This was verified through interviews with Health Service Administrator, nursing staff, mental health practitioners and review of the training attendance logs report issued on January 27, 2016.
	Based on the above, CMRC is in compliance with standard.
dard 11	L5.41 Screening for risk of victimization and abusiveness
	Exceeds Standard (substantially exceeds requirement of standard)
Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Resident Assessment, and April/May 2016 30-Day Resident Assessment.

It was demonstrated and signed documentation was provided; that all inmates upon admission to CMRC or transferred to another facility are screened for risks of sexual victimization or risk of sexually abusing other inmates.

Onsite interviews conducted with Health Service Administrator, Case Manager Supervisor, Case Workers, and PREA Compliance Manager.

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)
Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200 06 Use of Screening

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Use of Screening Information, and PREA Report.

CMRC policy requires that inmates be screened upon arrival at facility for an appropriate housing assignment. Inmates who are identified/screened as high risk for sexual victimization via the screening process are not to be placed in segregated housing, unless an assessment of all available alternatives has been completed, and there is no available alternative means of separation from likely abusers.

Also, agency policy requires that individualized determination be made about how to ensure offender's safety.

Onsite interviews conducted with Health Service Administrator, Case Manager Supervisor, Case Workers, and PREA Compliance Manager.

Based on the above, CMRC is in compliance with standard.

Standard 115.43 Protective custody

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

Documentation provided and reviewed: AR 100-40, AR 650-02, and CEC PREA Policy 1200.06 Protective Custody.

CMRC policy requires that inmates be screened upon arrival at facility, for an appropriate housing assignment. Inmates who are identified/screened as high risk for sexual victimization via the screening process are not to be placed in segregated housing, unless an assessment of all available alternatives has been completed, and there is no available alternative means of separation from likely abusers.

Also, agency policy requires that individualized determination be made about how to ensure offender's safety.

There were no cases of involuntary segregation during the current audit period. Therefore, documentation of actual practice is limited to policy content.

Standard	115 51	Inmate	reporting
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Standard 115.51 Inmate reporting		
		Exceeds Standard (substantially exceeds requirement of standard)
	Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
		Documentation provided and reviewed: AR 100-40, AR 300-38, AR 850-12, CEC PREA Policy 1200.06 Inmate Reporting, Ethics Hotline, PREA Resource Guide, PREA Rape Crisis Reporting Poster, and PREA Poster (English & Spanish).
		Agency policy indicates that inmates may report through verbal/written report to any staff member, by utilizing the CMRC PREA Hotline (the number is available on the posters found in each housing unit and throughout the facility) or through the prisoner appeal (grievance) process. Random interviewed staff was aware of various methods for inmates to report.
		CMRC also provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.
		There are posters posted is in both English and Spanish, advising inmates of their right to be free from sexual violence/harassment, the agency's zero tolerance policy, and a hotline number they can call.
		Staff accepts reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports.
		CMRC provides information on their website also, for the public to privately report sexual abuse and sexual harassment of inmates.
		Based on the above, CMRC is in compliance with standard.
Standa	ard 115	.52 Exhaustion of administrative remedies
		Exceeds Standard (substantially exceeds requirement of standard)
	Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	П	Does Not Meet Standard (requires corrective action)

Documentation provided and reviewed: AR 850-04 Grievance Procedures, CEC PREA Policy 1200.06 Grievances,

The agency has a formalized appeals process that allows offenders to file an appeal without having to submit to the staff member who is the subject of the appeal and, that the appeal will not be forwarded to the staff member.

The agency does not allow an offender to drop the pursuing of an allegation and will investigate all alleged

sexual abuse claims regardless of who filed the original appeal.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100.40, CEC PREA Policy 1200.06 Outside Support Services, and TESSA MOU.

CMRC has a MOU with T.E.S.S.A for victim advocacy; access to outside confidential support in the event there's an incident or allegation.

During the tour, it was noted CMRC PREA postings wasn't adequately posted in the housing units, and other commonly accessed areas for the offender to view. By the end of the onsite visit, posters were ordered and posted. The posting has the contact information, including a toll free number and an address to be utilized by offenders to contact them.

The MOU with T.E.S.S.A via CDOC is dated May 27, 2016.

Based on the above, CMRC is in compliance with standard.

Standard 115.54 Third-party reporting

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

Documentation provided and reviewed: AR 100.40, and CEC PREA Policy 1200.06 Third Party Reporting, GEO Website, PREA Poster (Director), and Ethics Hotline.

CMRC has a MOU with T.E.S.S.A for victim advocacy and another avenue for inmates to report. Onsite visit interviews conducted with the PREA Coordinator, Medical & Mental Health, random staff and offenders confirmed offenders' access to outside confidential support services.

CMRC & GEO website has agency's zero tolerance policy posted, and PREA information the public has as it relates to avenues inmates have that they can report to.

The MOU with T.E.S.S.A via CDOC is dated May 27, 2016.

Based on the above, CMRC is in compliance with standard.

Standard 115.61 Staff and agency reporting duties

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

Documentation provided and reviewed: AR 100.40, and CEC PREA Policy 1200.06 Staff Reporting, CEC PREA Response Flow Chart, PREA Poster (Director), and Ethics Hotline.

CMRC polices provide clear requirements to all staff regarding their obligation to report immediately any suspected or reported incidents involving sexual abuse and/or sexual harassment, regardless of whether the alleged incident took place at the offender current facility or not. In addition, the policy also require all reports and information related to allegations remain confidential to the extent necessary for treatment, investigation and for other management decisions.

Interviews with random staff all confirmed compliance and all were able to articulate the reporting process and what is required of them when doing so. In every interview the staff person was aware of the requirement to immediately report all allegations of sexual abuse and/or harassment as well as the requirement to document the report in writing as soon as possible. Each was able to articulate the process of being a first responder as well. Numerous custody and non-custody staff was interviewed and all knew the process very well, which indicates they receive and absorb the training required.

Based on the above, CMRC is in compliance with standard.

Standard 115.62 Agency protection duties

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

Documentation provided and reviewed: AR 100.40, and CEC PREA Policy 1200.06 Protection.

Agency's policy addresses this standard and specifically states all staff shall take immediate action to protect prisoners at risk of imminent sexual abuse. The interview with the CMRC Director confirmed when an inmate is subject to substantial risk the inmate will be located and assessed in order for staff to take the appropriate action.

The Director indicated the inmate would be immediately separated from the threat in the least restrictive method possible. This was also confirmed by speaking to many staff members during the tour, both custody and non-custody, and through the random staff interviews that were conducted. All staff members were aware of the requirement to immediately remove the prisoner from the area of the imminent threat.

Based on the above, CMRC is in compliance with standard.

Standard 115.63 Reporting to other confinement facilities

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

Documentation provided and reviewed: AR 100.40, and CEC PREA Policy 1200.06 Reporting to Other Confinement Facilities.

Agency's polices addresses upon receiving an allegation that an inmate was the victim of sexual violence or staff sexual misconduct while confined at another institution or facility, The Lead Facility Administrator where the allegation was received shall notify the head of the institution or appropriate office of the agency where the alleged incident occurred via telephone or email within 72 hours after receiving the allegation.

During the past 12 months, CMRC has not received any offenders into the facility that has claimed or alleged he was sexually abused while in the custody of an outside correctional facility, city or county jail, or any other law enforcement agency.

During the past 12 months, CMRC has not received any reports from outside agencies that reported an offender in their custody had been sexually abused while in the custody of CMRC.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100.40, CEC PREA Policy 1200.06 First Responder Duties, CEC PREA Response Flow Chart, and CMRC Response Plan, First Responder Training PPT.

Agency's policies provide information explaining the duties of staff that are first responders to allegations of sexual abuse or acts of sexual abuse. The policies require all staff to follow the protocol as dictated by this standard, including the separation of the alleged victim from the alleged abuser, preservation of evidence and the crime scene and to not allow the victim or abuser to take any action that would destroy physical evidence if the alleged incident took place within a time frame that would still allow for collection of that evidence.

CMRC provided facility staff with a pocket reference to show compliance. The pocket reference is given to all staff as a quick reference guide for staff response to allegations of sexual violence against inmates. A copy of the pocket reference provided as part of the audit and is recognized as an excellent practice by the CMRC. The reference covers all steps to take during incidents of sexual abuse and if followed assures compliance

with this standard.

All staff interviewed during the tour, during random staff interviews and during First Responder interviews knew how to respond to and appropriately handle allegations of sexual assault as a first responder.

During the past 12 months, CMRC did not conduct any SME's related to sexual abuse or sexual harassment, which would require the implementation of PREA protocol.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100.40, CEC PREA Policy 1200.06 Coordinated Response, CEC PREA Response Flow Chart, and CMRC Response Plan.

CMRC has developed a Facility Response Plan to utilize in conjunction with a PREA Process Flowchart. The Response Plan and Process Flow Chart breaks down the required duties of every staff member involved in the handling of sexual abuse cases, from First Responders, Supervisory staff, Medical staff, Mental Health staff, Investigative staff and Administrative staff.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: CEC PREA Policy 1200.06 Collective Bargaining and Collective Bargaining Agreement.

The facility provided the collective bargaining unit, effective on April 7, 2015 to April 7, 2017. The contract was reviewed and found nothing, which impedes the agency's ability to remove alleged staff sexual abusers from contact with any prisoner(s) pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

An interview with the agency head (Director) of CMRC confirmed compliance with this standard.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100-40, AR 1150.18, and CEC PREA Policy 1200.06 Agency Protection Against Retaliation.

Agency's policies specifically states retaliatory measures against employees and offenders who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution.

CMRC policy also requires staff to monitor, for a minimum of 90 days following a report, the treatment of inmates and/or employees for treatment, which might suggest retaliation. The policy outlines the following as items to be monitored during periods of retaliation monitoring: periodic status checks, disciplinary reports, housing or program changes or negative performance reviews or reassignments.

The policy goes on to state retaliatory measures as coercion, threats of punishment, or any other activity intended to discourage or prevent staff or offenders from reporting or cooperating with investigations. Additionally the policy specifically addresses a prohibition against retaliation against staff.

CMRC did not have any staff or offenders that reported sexual abuse or harassment that CMRC was required to protect from any retaliation for reporting sexual abuse or harassment claims.

Based on the above, CMRC is in compliance with standard.

Standard 115.68 Post-allegation protective custody

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

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Post Allegations Protective Custody, and Incident Report Review.

CMRC policy indicates inmates will not be placed in involuntary segregation unless an assessment of all available alternatives has been made and a determination is made that no alternative is available. The facility will assess any inmate in these circumstances immediately but no more than 24 hours.

Based on the above, CMRC is in compliance with standard.

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)
Documentation provided and reviewed: AR 100-40, AR 1150.04, AR 1150.07, 2016 PREA Investigator Training Acknowledgment, CEC PREA Policy 1200.06 Investigations, OIG Training Records & Curriculum, CMRC's policy addresses investigations of sexual abuse and sexual harassment. The policies dictates that CMRC conduct investigations into allegations of sexual abuse and harassment immediately upon becoming aware of the allegation, regardless of how the report is received. This was verified during the interview with investigative staff and Facility PREA Compliance Manager. The review of investigations during the audit revealed all allegations received were immediately addressed. During the past 12 months, CMRC did not have any staff member who was recommended for any corrective action for violating any policy related to sexual abuse or sexual harassment of an offender or staff member.
Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: AR 100- 40 (Pg25, Sec J), OIG Training Record, 2016 PREA Investigator Training Acknowledgment.

Agency policy clearly state the agency shall impose no standard higher than preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with investigative staff verify the practice of utilizing the preponderance of the evidence standard is utilized at the facility.

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Stand	lard 115	5.73 Reporting to inmates
		Exceeds Standard (substantially exceeds requirement of standard)
	\square	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
		Documentation provided and reviewed: AR 100- 40, CEC PREA Policy 1200.06 Notification.
		Agency's policy addresses this specific standard by requiring written notification is provided to the victim to indicate the outcome of the investigation. The notification shall include information on the perpetrator and the status of that person as far as employment, placement and future prosecutions.
		The facility reported zero allegations against staff that would have required the notifications in section (c). The facility reported no instances where the notification requirements in section (d) needed to be met. Investigative staff was questioned about what and when an inmate would be notified and all were aware of the requirements in these sections.
		Based on the above, CMRC is in compliance with standard.
Stand	ard 115	5.76 Disciplinary sanctions for staff
		Exceeds Standard (substantially exceeds requirement of standard)
	\square	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)

Documentation provided and reviewed: AR 100-40, CEC PREA Policy 1200.06 Staff Sanction, Employee Handbook, and Disciplinary Sanction Memo.

CMRC policy outlines disciplinary standards for employees, volunteers and contractors and meet the requirement set by the standard. Agency police define termination as the presumptive sanction and that disciplinary history, circumstances of the act and sanctions of similar offenses will be considered. Interviews with staff confirmed the facility is following the standard as written.

Agency policy and interviews with investigative staff indicate that any criminal behavior will be referred to the CDOC OIG and prosecutor's office requesting charges. During the previous review period, CMRC did not have a staff member who was terminated and or resigned due to the violation of sexual abuse or harassment policy.

In addition, CMRC did not have a staff member who was terminated and or resigned due to the violation of sexual abuse or harassment policy in the past 12 months.

	Exceeds Standard (substantially exceeds requirement of standard)
	Exceeds Standard (substantially exceeds requirement of standard)
$\overline{\mathbf{Q}}$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
	Documentation provided and reviewed: CEC PREA Policy 1200.06 Contractor and Volunteer Sanctions, and AR 100-40.
	Requirements covering this standard are provided in CMRC policy. The OIG investigative staff, state they will investigate allegations reported against contractors/volunteers as any other PREA case and would refer allegations for criminal prosecution if warranted.
	CMRC reported on the PAQ no cases of sexual abuse/harassment involving contractors or volunteers. This was confirmed during the facility audit tour.
	Based on the above, CMRC is in compliance with standard.
dard 11	15.78 Disciplinary sanctions for inmates
	Exceeds Standard (substantially exceeds requirement of standard)
$\overline{\mathbf{Z}}$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)
	Documentation provided and reviewed: CEC PREA Policy 1200.06 Disciplinary Sanctions for Inmates, R 100-40.
	CMRC policy covers this standard and considers all specifics listed in the standard when imposing sanctions. The agency does not allow for consensual sexual relations.
	CMRC did not have any offender on offender disciplined for the violation of sexual abuse or harassment policy.

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

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		Exceeds Standard (substantially exceeds requirement of standard)
	\square	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
		Documentation provided and reviewed: CEC PREA Policy 1200.06 Medical and Mental Health Screenings and AR 100-40.
		CMRC policy requires if reported by an inmate during intake screening, he has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is referred to mental health.
		The requirements of agency policy and the inmate screens meet the requirements of this standard with regard to the process of referral and mental health follow-up.
		Information related to sexual victimization or abusiveness occurring in an institutional setting is strictly limited to medical and mental health practitioners, and other staff only as necessary to inform treatment plans, security and management decisions. Medical and Mental Health staff only have access to the electronic medical records and information would only be shared if it were absolutely necessary for treatment and security decisions as indicated above.
		Based on the above, CMRC is in compliance with standard.
Stand	ard 115	5.82 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)
		Documentation provided and reviewed: CEC PREA Policy 1200.06 Emergency Health Services, and AR 100-40.
		CMRC policy requires offenders receive timely unimpeded access to emergency medical treatment, and crisis

intervention services without delay.

CMRC has a MOU with T.E.S.S.A for victim advocacy and another avenue for inmates to report. Onsite visit interviews conducted with the PREA Coordinator, Medical & Mental Health, random staff and inmates confirmed inmates' access to outside confidential support services.

The MOU with T.E.S.S.A via CDOC is dated May 27, 2016.

Treatment services shall also be provided to the victim without financial costs. Through Random staff interviews it was found that staff have the knowledge of the proper steps that must be taken in order to protect

the inmate victim after sexual abuse is reported and immediately notify a supervisor and/or make a referral to Mental Health.

Based on the above, CMRC is in compliance with standard.

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

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

Documentation provided and reviewed: CEC PREA Policy 1200.06 Ongoing Healthcare, CEC PREA Policy 1200.06 Section 115.83H, TESSA MOU, AR 100-40, AR 700-02, and AR 700-03.

CMRC policy requires offenders receive timely unimpeded access to emergency medical treatment, and crisis intervention services without delay.

CMRC has a MOU with T.E.S.S.A for victim advocacy and another avenue for inmates to report. Onsite visit interviews conducted with the PREA Coordinator, Medical & Mental Health, random staff and inmates confirmed inmates' access to outside confidential support services.

The MOU with T.E.S.S.A via CDOC is dated May 27, 2016.

Medical and mental health staff interviewed indicates prisoner victims would be immediately evaluated and treated. Prisoners are not charged for these services. Treatment and evaluation of prisoners are consistent with community level of care and include follow-up evaluations, treatment and referrals where necessary.

Based on the above, CMRC is in compliance with standard.

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)

Documentation provided and reviewed: CEC PREA Policy 1200.06 Sexual Abuse Incident Reviews, AR 100-40, 2016-2017 Reportable Incidents, and PREA Incident Reviews.

CMRC policy requires reviews to be held within 30 days of conclusion of the sexual abuse incident. The policy indicates the PREA Incident Audit Team will conduct said review. Incident Audit Team shall include upper management officials with input from line supervisors, investigators, medical and/or mental health staff, case managers and intelligence officers.

Standard 115.87 Data collection

☐ Exceeds Standard	(substantially exceeds	requirement of standard)
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Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

Documentation provided and reviewed: CEC PREA Policy 1200.06 Data Collection, 2015 Annual Report, 2016 Annual Report, 2015 BJS SSV, GEO Website, and PREA Website.

CMRC policy requires the agency to collect the data annually. Agency data is compiled on a yearly tracking report and updated as investigations are concluded.

CMRC policy requires the Agency to collect the data annually. The agency provides Department of Justice data from the previous calendar year upon request.

Investigation files reviewed during audit confirmed the forms are being sent. Agency data is compiled on a yearly tracking report and updated as investigations are concluded.

The Lead Facility Program Administrator tracks, and reports data to the Corporate PREA Coordinator annually. Tracking reports were reviewed and show data being collected.

Based on the above, CMRC is in compliance with standard.

Standard 115.88 Data review for corrective action

Exceeds Standard (substantially exceeds requirement of standard)	oi Standard
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Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Documentation provided and reviewed: CEC PREA Policy 1200.06 Data Review for Corrective Action, Annual Report, 2015 Annual Report, GEO website, and PREA Website.

CMRC policy requires the Agency to collect the data annually. CMRC provides Department of Justice data from the previous calendar year upon request.

Investigation files reviewed during audit confirmed the forms are being sent. Agency data is compiled on a yearly tracking report and updated as investigations are concluded.

The Lead Facility/ Program Administrator tracks, and reports data to the Corporate PREA Coordinator annually.

The Corporate PREA Coordinator shall review data collected and aggregated pursuant to, in order to assess and improve the effectiveness of its sexual abuse, prevention, detection, and response policies, practices, and

training.

Agency policy requires a comparison and assessment and such data will be made available to the public on the Agency's website. Policy also allows for data to be redacted if it presents a threat to safety and security.

Based on the above, CMRC is in compliance with standard.

Standard 115.89 Data storage, publication, and destr	uction
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Standa	rd 115.	89 Data storage, publication, and destruction
		Exceeds Standard (substantially exceeds requirement of standard)
	Ø	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
		Documentation provided and reviewed: CEC PREA Policy 1200.06 Data, Storage, and Publication, CEC 2016 Annual Report, 2015 Annual Report, GEO website, and PREA Website. CMRC policy requires data to be securely maintained, requires the data is made available to the public through the Agency website, requires identifiers to be removed and data to be maintained for at least 10 years. Agency policy also ensures data from contracted facilities is included in reports. CMRC files were found to be kept in a secure area and only accessed by authorized staff. The Agency website was reviewed and PREA information was posted and easily available to the public. Based on the above, CMRC is in compliance with standard.
AUDITO I certify		TIFICATION
		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

Wynnie R. Testamark	October 4th, 2017

Auditor Signature

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review, and

requested in the report template.

Date

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