

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: September 24, 2017

Auditor Information			
Auditor name: David K. Haasenritter			
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Email: davidkhaasenritter@gmail.com			
Telephone number: 540-903-6457			
Date of facility visit: March 6-8, 2017			
Facility Information			
Facility name: Guadalupe County Correctional Facility			
Facility physical address: South Highway 54 County Road 3B, Santa Rosa, NM 88435			
Facility mailing address: <i>(if different from above)</i> P.O. Box 520, Santa Rosa, NM 88435			
Facility telephone number: 575-472-1001			
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: Vincent Horton			
Number of staff assigned to the facility in the last 12 months: 152			
Designed facility capacity: 610			
Current population of facility: 593			
Facility security levels/inmate custody levels: Level III, Medium Custody			
Age range of the population: 21-78			
Name of PREA Compliance Manager: Amy Campos		Title: ACA Compliance Administrator	
Email address: acampos@geogroup.com		Telephone number: 575-472-1001	
Agency Information			
Name of agency: The GEO Group Inc.			
Governing authority or parent agency: <i>(if applicable)</i>			
Physical address: One Park Place, Suite 700, 621 Northwest 53 rd Street, Boca Raton, Florida 33487			
Mailing address: <i>(if different from above)</i> Same as above			
Telephone number: 561-999-5827			
Agency Chief Executive Officer			
Name: George C. Zoley		Title: Chairman of the Board, CEO and Founder	
Email address: gzoley@geogroup.com		Telephone number: 561-893-0101	
Agency-Wide PREA Coordinator			
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 the Guadalupe County Correctional Facility was conducted on March 6-8, 2017 by Mr. David Haasenritter. The announcement of the audit was posted on January 8, 2017. Approximately three weeks prior to the audit, the auditor received the Pre-Audit Questionnaire and additional documents through a secure thumbdrive. Documents included examples from 2015, 2016, and 2017. The night before the audit the facility provided a roster of all inmates housed at the institution; lists of inmates for specific categories to be interviewed; and a list of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specific category).

The auditor contacted Just Detention International (JDI) about any information previously submitted by inmates at the Guadalupe County Correctional Facility and reviewed both the GEO website and New Mexico Corrections Department prior to the audit. The GEO website is one of the easiest to find PREA information of all agencies this auditor has audited. GEO PREA page is very informative and has general PREA information on: agency zero tolerance Policy; how for staff, inmates, and third parties to report; information on investigations; and where questions and inquiries can be forwarded to the PREA Coordinator (phone number, email, and mailing address). It also has several links to include: PREA standards; GEO basic and investigative PREA policies; GEO facility PREA audit reports; and GEO's current annual PREA Report.

Following the entrance meeting with staff, the auditor toured the facility on March 6, 2017 and went back to certain areas in the institution on March 6-8, 2017. While touring, random inmates and staff were informally interviewed (not counted in interview count) and questioned about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. All staff and inmates informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment and/or retaliation for reporting. During the tour, the auditor reviewed staffing logs; physical plant; sight lines; camera coverage; tested the inmate phone system for reporting allegations and for emotional support services; and institution operations.

Following the initial tour, the auditor began the formal interviews, review of investigations, checking of cameras, and random checks of personnel, medical, and training records. Some of the review of staff and inmate records were scanned for review after the on-site audit. The auditor conducted 40 staff interviews (15 random, two contractors/two volunteers, and 21 specialized) two New Mexico Department of Corrections staff (on-site monitor and PREA Coordinator) and a New Mexico State Highway Investigator. The GEO PREA Coordinator and Agency head representative was previously interviewed by this auditor during the audit cycle. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation. GEO has continued to build a culture of zero tolerance, and the working relationship between GEO, New Mexico Department of Corrections, and New Mexico State Highway Patrol further strengthened the safety and zero tolerance for sexual abuse and harassment.

A total of 23 inmates were formally interviewed: 23 random (two from each general population housing unit, three from the special housing unit) interviews; and 11 inmates who were interviewed using the specialized interview sheets (LGBTI (4), who disclosed sexual victimization during screening (5); and who reported sexual abuse while confined (2)). Majority of the inmates interviewed acknowledged receiving PREA training and written materials (posters, pamphlets, and inmate's handbooks) in a language they understand outlining the agencies zero tolerance policies towards sexual abuse; knew the reporting procedures; and reported staff of the opposite gender announced when entering a housing area. All inmates who were asked stated they felt safe at the institution. The auditor found the inmates very aware of PREA.

Mr. Rob Walling (GEO PREA office) and Ms. Jillian Shane New Mexico Corrections Department PREA Coordinator were present during the audit and were very helpful during the audit. The New Mexico Corrections Department liaison to Guadalupe County Correctional Facility provided assistance. The knowledge of PREA, and team work exhibited and expressed during the audit demonstrated both GEO and New Mexico Corrections Department strive to have a facility free of sexual abuse. The team work exhibited during this and the Northeast New Mexico Correctional Facility was the best observed between a state agency and private agency by the auditor in four years of PREA auditing and both agencies should be commended.

Based on the tracking logs there were no allegations in 2017 (January and February), five in 2016, and 14 in 2015. Prior to the audit the facility provided the auditor one case from 2016, and two from 2015. During the on-site and interim report writing period the auditor requested and reviewed three specific cases from 2016 and two from 2015. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the eight cases reviewed by the auditor: one staff-on-inmate sexual abuse substantiated; one staff-on-inmate sexual abuse unsubstantiated; two staff-on-inmate sexual abuse unfounded; one staff-on-inmate sexual harassment still open at the time of the audit; one inmate-on-inmate sexual harassment unsubstantiated; one inmate-on-inmate sexual harassment unfounded; and one unknown-on-inmate sexual abuse unsubstantiated.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the institution a final finding, the auditor did provide a preliminary status of his findings. The auditor thanked GEO, New Mexico Corrections Department, and

Guadalupe County Correctional Facility staff for their hard work and commitment to the Prison Rape Elimination Act.

During the interim report writing, the auditor reviewed modified policies, additional documents, investigative packets to include investigative summaries; notice to the victim of the findings; monitoring for retaliation; and incident reviews.

DESCRIPTION OF FACILITY CHARACTERISTICS

Guadalupe County Correctional Facility is a medium security adult male facility located in Santa Rosa, New Mexico. The count on the first day of the audit was 598 inmates.

The Guadalupe County Correctional Facility is located just off South Highway 54, two miles southwest of Santa Rosa, New Mexico. Santa Rosa lies approximately 120 miles east of Albuquerque, New Mexico and 160 miles west of Amarillo, Texas. Guadalupe County Correctional Facility is operated by GEO Group Inc., a private, for profit, corporation headquartered in Boca Raton, Florida. Guadalupe County Correctional Facility is under contract with the State of New Mexico to house up to 601 State inmates with a security classification of Level III (medium custody; and under a separate contract Guadalupe County Correctional Facility houses up to 20 Guadalupe County detainees. The physical plant consists of three buildings and the inmate housing and nearly all support functions are in one “main” building. The main building has a corridor running the length of the building; inmate housing units and support functions are located on wings off the main corridor. Staff and visitors enter Guadalupe County Correctional Facility through a remotely controlled front gate. Immediately upon entering staff and visitors are required to undergo a search of their packages/bags and must clear a walk-through metal detector. Upon clearing the metal detector and providing a photo identification, at the front control point, staff may enter the administration area. The administration area includes the Warden's office, personnel, mail, business office, records, and contract manager offices. After passing a second control point, staff has access to medical, segregation, supply/warehouse, laundry, food service, warehouse, visitation, medical, programs and housing units. There are two general population housing units. Housing Unit One has one control center, five pods, containing 120 double bunked cells split on two levels, and 33 single cells for the segregation living. Housing Unit Two has five pods containing 153 double bunked cells split on two levels. Housing Unit Three houses segregation inmates and consists of 11 double bunked cells on one level for a maximum of 22 beds, a 22 bed Honor Unit and one 22 bed county inmate pod. Plus, the kitchen, laundry, programs area, work areas and industries.

The mission of Guadalupe County Correctional Facility is “to maintain a level of security such that the safety of the public is maintained as well as the safety of Guadalupe County Correctional Facility employees and inmates. A system of order shall be initiated and perpetuated in such a manner as to produce an atmosphere conducive to efficient work, programming activities and services for all, and in an environment, that provides for the rehabilitation of all inmates.”

SUMMARY OF AUDIT FINDINGS

On March 6 - 8, 2017, the on-site visit was completed. Within a week of the audit being completed, the auditor provided a list of not met standards, and standards requiring additional information. During the 45-day interim report writing period, two standards were identified as requiring corrective action. On July 6, 2017, the Guadalupe County Correctional Facility was found in full compliance:

Number of standards exceeded: 4

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 1

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.

GEO operates the Guadalupe County Correctional Facility to house New Mexico Corrections Department inmates. GEO has very good written policies mandating zero tolerance towards all forms of sexual abuse and sexual harassment that outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The main PREA policies are GEO Policy 5.1.2, Sexual Abuse Behavior Prevention and Intervention Program (PREA); GEO Policy 5.1.2-A, Sexual Abuse Behavior Prevention and Intervention Program (PREA for Adult Prison, Jail, and Adult Community Confinement Facilities); and GEO Policy 5.1.2-E, Investigating Allegations of Sexually Abusive Behavior (PREA). Other agency policies supplement these main PREA policies. Guadalupe County Correctional Facility Policy 12.000 Sexual Abuse Behavior Prevention and Intervention Program (PREA) and is the facility supplement to implement PREA. Agency and facility policies and procedures were very well organized. It is clear to the auditor that the Prison Rape Elimination Act is part of the GEO fabric. Guadalupe County Correctional Facility also follows New Mexico Corrections Department policies CD-150100 Offender Protection Against Abuse and Sexual Misconduct; Reporting Procedures, PREA and CD-150101 Offender Protection Against Abuse and Sexual Misconduct; Reporting Procedures, PREA.

GEO employs an upper-level, agency-wide facility PREA Coordinator and a PREA Compliance Manager. Ms. Phebia Moreland is the PREA Coordinator. She is very knowledgeable of PREA standards and is one of the top PREA Coordinators I have met. Ms. Moreland has the authority to develop, implement, and oversee PREA compliance. She is very active in coordinating PREA, consistently sending updates to facilities, especially as FAQs are posted on the PREA website. She conducts training and meetings to keep unit PREA Compliance Managers up to date on any changes and best practices. She is consistently looking for ways to improve GEO’s PREA program. The GEO organization chart demonstrates Ms. Moreland is in a position of authority. The auditor has observed her develop, implement and oversee compliance during this and other audits the auditor conducted. She indirectly supervises 80 compliance managers (Prisons and Jails, Community Corrections, Lockups, and Juveniles) through three regional corrections coordinators, one community corrections coordinator, and one juvenile coordinator. She often goes directly to the compliance managers to coordinate changes, provide updates, conduct training, and on-site during audits. For Guadalupe County Correctional Facility, she also works with the New Mexico Corrections Department PREA Coordinator. It was obvious to the auditor there was a great working relationship, both striving to make Guadalupe County Correctional Facility a safer facility to be confined and work at.

Ms. Amy Campos (ACA Compliance Administrator) is the Guadalupe County Correctional Facility PREA Compliance Manager, who reports to the Warden for PREA. She was knowledgeable of PREA standards and was actively involved in PREA activities. Ms. Campos claimed to have enough time to perform her PREA duties. She coordinates and conducts training, provides information at staff calls, contacts the GEO and New Mexico Corrections Department PREA Coordinators for clarification and guidance. Review of her job description and Guadalupe County Correctional Facility organizational chart demonstrated she had the authority to coordinate the facility’s efforts to comply with PREA. During the audit, it was obvious she had the freedom and authority to discuss issues with the Warden.

Ms. Jillian Shane New Mexico Corrections Department PREA Coordinator was present during the audit and was very helpful during the entire audit process. Her knowledge of PREA is outstanding, she coordinates MOU’s with outside agencies for all Correctional Facilities in New Mexico (public and private) and works issues and solutions with GEO to have a facility free of sexual abuse. The team work between GEO and New Mexico Department of Corrections was the best observed between a state agency and private agency by the auditor in four years of PREA auditing and both agencies should be commended.

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.

GEO is a private provider and does not contract with other agencies for the confinement of inmates. GEO Policy 5.1.2-A Sexually Abusive Behavior Prevention and Intervention Program (PREA for Adult Prison and Jail and Adult Community Confinement Facilities) states GEO shall adhere to all contracts with other entities for the confinement of individuals that require its obligation to adapt and comply with the PREA standards. It also states contractors in its facilities that have direct contact with individuals in GEO facilities or programs shall be obligated to comply with PREA standards. These requirements are required to be in the contracts. The contract for confining New Mexico Corrections Department inmates is between New Mexico Corrections Department and the Guadalupe County. The contract was signed prior to 2012 thus has no requirements to be in compliance with PREA standards. The auditors were also provided a copy of other contracts between New Mexico Corrections Department and other agencies that confine New Mexico Corrections Department inmates signed after August 2012 which does require meeting PREA standards. There is a New Mexico Corrections Department on-site client monitor responsible for ensuring compliance. Monthly inspections on specific standards such as inmate screening is conducted. The auditor reviewed several the monthly inspections. These inspections are just one example of the New Mexico Corrections Department PREA involvement.

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.

GEO ensures each institution it operates develops documents, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse by monitoring and reviewing the staffing plans. GEO Policy 5.1.2-A establishes procedures to develop and monitor staffing plans uses the criteria found in standard 115.13 (a) to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan. GEO Policy 5.1.2-A and New Mexico Corrections Department Policies CD-150100 and CD-150101 addresses an annual review of the staffing plan to include video monitoring; and procedures for intermediate and higher level unannounced rounds.

The auditor reviewed the Guadalupe County Correctional Facility staffing plan; and 2015 and 2016 annual review. The staffing plan is reviewed annually by the facility, GEO Corrections Division, and PREA Coordinator. The plan follows generally accepted correctional practices. All components of the facility's physical plant are considered and blind-spots are acknowledged and steps are taken to fix the blind spots. The signature of the PREA Coordinator on the Annual Review confirmed that this was done in consultation with her.

By Policy the facility documents all deviations to the plan and it is reported to GEO. Per the Pre-audit questionnaire and interview of the Warden and PREA Compliance Manager; and review of manning sheets; there were no deviations from the plan. The facility has not been able to hire all the authorized security personnel, but through overtime fills all its positions in the plan. The Warden reviews posting logs to ensure all positions are properly manned.

Throughout the site review, the auditor saw evidence that intermediate and higher-level supervisors conduct and document unannounced rounds on all shifts to deter and identify staff sexual abuse and sexual harassment. PREA unannounced rounds are documented in housing unit logs, duty officer checklists, and a “PREA Unannounced Rounds Questionnaire” form that captures whether PREA information is posted; did opposite gender staff announce their presence when entering housing units; and questioning of both staff and inmates on PREA information. Examples of those documents were provided prior to the audit, and the auditor reviewed additional 59 “PREA Unannounced Rounds Questionnaire” during the interim report writing period. The “PREA Unannounced Rounds Questionnaire” is a very good document to make unannounced rounds in that it captures things that should be checked and documents observations and checks. Staff and inmate interviews further confirmed the unannounced rounds by supervisors. Supervisors prevent alerting by going to housing and program areas at different times throughout the shifts.

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.

X Not Applicable

New Mexico Corrections Department Policy CD-150100 designates youthful inmates to be housed at the Youthful Offender Management Unit at Central New Mexico Facility. The contract for confining New Mexico Corrections Department inmates between New Mexico Corrections Department and the County of Santa Fe does not address confining youthful inmates. GEO Policy 5.1.2.A does cover all parts of the standards for GEO facilities that do confine juveniles. Review of inmate records demonstrate no youthful inmates were confined at the facility.

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.

Based on review of GEO Policy 5.1.2-A and Guadalupe County Correctional Facility Policy 08.008 Search of Inmates and Search of Areas, review of training material, interview of staff and inmates, and observation it was determined the facility limits cross-gender viewing and searches. Guadalupe County Correctional Facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches, and staff is prohibited and does not search transgender or intersex inmates to determine inmates’ genital status.

Standards 115.15 b and part of c does not apply as Guadalupe County Correctional Facility is a male only facility.

Based on review of GEO Policy 5.1.2-A and Guadalupe County Correctional Facility Policy 12.000, review of training material, and

interview of staff and inmates; inmates are able to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks. Most inmates interviewed stated they could shower and change clothes without being observed by female staff. Observation of during the audit identified inmates were unable to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks in some housing units, gymnasium, and intake areas. Some were adjusted during the interim report writing period and photos were provided to the auditor. The Corrective Action Plan is for all areas identified during the audit to be modified so inmates were unable to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks. Photos need to be taken at each area and provided to the auditor within 120 days of the on-site audit being completed. Photos of all areas was provided to the auditor. The modifications allow inmates to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks in all areas identified during the on-site audit. All the modifications done were done professionally and was not rushed to simply meet a standard. Guadalupe County Correctional Facility found to be compliant with the standard.

Based on review of GEO Policy 5.1.2-A and Guadalupe County Correctional Facility Policy 12.000, review of training material, interview of staff and inmates, review of logs, and observation it was determined female staff do not always announce their presence when entering an inmate housing unit. Logs and interviews of staff and inmates demonstrated female security staff announce at the beginning of the shift. The Corrective Action Plan is for the Guadalupe County Correctional Facility to modify policy and procedures, conduct training and implement announcing each time a female staff member enters the housing unit and no other female staff member is in the housing unit. The facility needs to provide the auditor documentation of providing the change in policy; training on the process; and start date of the new process. The facility needs to implement the new policy for 90 days before the auditor move the finding to meet standards. The auditor will interview staff. Guadalupe County Correctional Facility modified procedures for female staff to announce their presence each time they enter the housing unit and not just at the beginning of shift. Staff were trained and documents demonstrating the training was provided to the auditor. The auditor conducted interviews of staff, the staff could explain when females have to announce entering into an inmate housing unit. Guadalupe County Correctional Facility found to be compliant with the standard.

Review of training records and lesson plans demonstrated staff had been trained on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Guadalupe County Correctional Facility asks transgender inmates whether they want to be searched by a male or female staff, if they prefer to shower separately, and the pronoun they want to be referred by. Examples of the form that captures this information was provided to the auditor. Interviews of staff demonstrated staff could not define transgender and was unsure of the proper procedures to conduct pat down searches of transgender and intersex inmates. Some staff interviewed said they were not trained. A Corrective Action Plan was developed to retrain staff on the definition of transgender; and how to conduct searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible. The auditor should be sent a copy of the training material and staff training rosters. The auditor will then conduct some telephone interviews. Guadalupe County Correctional Facility conducted training of staff on the definition of transgender and transgender searches, and documents demonstrating the training was provided to the auditor. The auditor conducted telephonic interviews of staff interviewed could define transgender and explain how to conduct a transgender search. Guadalupe County Correctional Facility found to be compliant with the 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)

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.

GEO Policy 5.1.2-A, New Mexico Corrections Department Policy CD 150100, and Guadalupe County Correctional Facility procedures ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. GEO, New Mexico Corrections Department, and Guadalupe County Correctional Facility has taken appropriate steps to ensure that inmates who are limited English proficient or disabled have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Staff provide foreign language translation and assistance. PREA handouts and inmate handbooks are in English and Spanish. English and Spanish PREA posters are posted throughout the institution for inmates and staff to see.

The New Mexico Corrections Department PREA Resource Guide for Inmates is also in English and Spanish. It has a lot of good information to include defining PREA; New Mexico Corrections Department Zero Tolerance Policy; Reporting; phone numbers and address for victim advocates; investigation information; what to do if abused; and how to avoid sexual abuse in confinement. Staff and inmates interviewed stated inmates are not used as interpreters when addressing sexual abuse and sexual harassment allegations. The Pre-Audit Questionnaire (PAQ) stated no inmate interpreters had been used.

Informational and educational materials for inmates with physical and mental disabilities are provided in ways that will enable the inmate to understand the GEO and New Mexico Corrections Department zero tolerance Policy and related material and be able to make a claim of sexual abuse or sexual harassment, if necessary. For inmates who are hearing impaired, the facility has a Teletype (TTY) machine available for inmates who are hearing impaired. Provisions can be made for inmates who may be visually impaired, though those with limited vision are assisted by some of the posters and handouts having been printed in larger print. For inmates with a mental disability, staff spend time to ensure they understand the PREA basics of definitions and reporting.

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.

GEO Policy 5.1.2-A outlines Policy and procedures to ensure staff and contractors are not hired or promoted who has engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. GEO Policy 5.1.2-A also requires the institution to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Prior to and during the audit, the auditor reviewed employee application packets and contractor packets. Through review of staff and contractor records and staff interviews it was determined Guadalupe County Correctional Facility staff and contractors are not hired or promoted if they have engaged in sexual abuse in a prison, jail, lockup, community confinement institution, juvenile institution, or other institution; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion. The documents and interviews also demonstrated GEO and the facility considers 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. The auditor reviewed three staff application packets and one contractor packet before the audit and randomly reviewed three additional new hire packets during the on-site audit and interim report writing period.

GEO Policy 5.1.2-A requires background checks for staff; and 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. Prior to and during the on-site audit, reviewed background checks and employee application packets that demonstrated background checks were done prior to employment. Interviews of Human Resource staff and employees, and review of application packets also demonstrated contact with prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Background checks include checks through ACCURATE Inc, though GEO recently changed the contract to AURICO LLC to do the background checks.

GEO Policy 5.1.2-A requires criminal background records check before enlisting the services of any contractor who may have contact with inmates. Reviewed contractors background check prior and during the audit. Interviews of Human Resource staff and contractors, and review of contractor packets demonstrated background checks were conducted.

GEO Policy 5.1.2-A establishes the procedures to conduct criminal background records checks at least every five years of current employees

and contractors who may have contact with inmates. Prior to and during the audit reviewed background checks conducted on employees and contractors. The auditor reviewed 24 employee and contractor background checks during and following the on-site audit, all 24 had up to date background checks.

GEO Policy 5.1.2-A states shall ask all applicants and employees who may have contact with inmates directly about previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees; and imposes upon employees a continuing affirmative duty to disclose any such misconduct. GEO Policy 5.1.2-A requires information be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Interviews and review of applications and employee annual affirmation demonstrated GEO and Guadalupe County Correctional Facility addressed previous sexual misconduct as described in PREA standard 115.17 (a) in written applications or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The auditor reviewed two promotion packets during the on-site audit.

GEO Policy 5.1.2-A states material omissions regarding sexual misconduct, or the provision of materially false information, shall be grounds for termination.

GEO Policy 5.1.2-A states GEO will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Per interview of Human Resource staff Guadalupe County Correctional Facility would provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. On site, the auditor reviewed two examples of request that they provided the information on former employees.

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.

Through review of GEO Policy 5.1.2-A and interviews of the Agency Head representative, PREA Coordinator, PREA Compliance Manager, and Warden it was determined that the GEO considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Guadalupe County Correctional Facility was budgeted for \$250,000 of upgrades of video monitoring in 2017.

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.

GEO Policy 5.1.2-E Investigating Allegations of Sexually Abusive Behavior (PREA) and New Mexico Corrections Department Policy CD-150102 outline evidence protocols for administrative proceedings and criminal prosecutions; requirements for forensic medical exams; and when requested by the victim, a victim advocate to accompany and support the victim through the forensic examination, investigatory interviews, emotional support, crisis intervention, information, and referrals.

Guadalupe County Correctional Facility makes available to the victim a victim advocate from a rape crisis center. MOU with New Mexico Department of Corrections and New Mexico Coalition of Sexual Assault Programs, Inc. which allows for Solice Crisis Treatment Center to provide services that includes: access to an advocate via phone, mail, or e-mail to victims of sexual violence who are incarcerated at Guadalupe County Correctional Facility; provide in-person advocacy when resources and staff availability permit; maintain confidentiality and ensure that inmates are aware of their right to make an anonymous report; provide inmates with Solice Crisis Treatment Center contact information for follow up services post-incarceration; etc. The auditors called the Solice Crisis Treatment Center during the on-site audit.

There is a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions. The protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. Staff interviewed were very knowledgeable of the evidence protocols, and could explain the protocol for obtaining useable evidence when an inmate alleged sexual abuse. The Guadalupe County Correctional Facility and New Mexico Highway Patrol Investigator during interviews demonstrated they had a good understanding of the investigative procedures and responsibilities and evidence protocols.

GEO Policy 5.1.2-E requires all victims of sexual abuse are provided access to forensic medical examinations whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate, by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. The agency offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). There were no forensic exams in the last 12 months, but the auditor was provided documentation of two examples in 2015. In both cases the forensic exam was provided by a SANE from the Albuquerque SANE Collaborative. Review of documentation demonstrated the victims of alleged sexual abuse were offered an appointment with the Qualified Mental Health Professional. As requested by the victim, a victim advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

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.

GEO Policy 5.1.2-E and New Mexico Corrections Department Policy CD-150102 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, that all allegations of sexual abuse or sexual harassment are referred for investigation by the appropriate authority.

Based on review of the investigative paperwork, and interview of staff and inmates; an administrative or criminal investigation is conducted for all allegations of sexual abuse and sexual harassment. GEO's investigative Policy is available on the GEO Web site.

Based on the tracking logs there were no allegations in 2017 (January and February), five in 2016, and 14 in 2015. Prior to the audit the facility provided the auditor one case from 2016, and two from 2015. During the on-site and interim report writing period the auditor requested and reviewed three specific cases from 2016 and two from 2015. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the eight cases reviewed by the auditor: one staff-on-inmate sexual abuse substantiated; one staff-on-inmate sexual abuse unsubstantiated; two staff-on-inmate sexual abuse unfounded; one staff-on-inmate sexual harassment still open at the time of the audit; one inmate-on-inmate sexual harassment unsubstantiated; one inmate-on-inmate sexual harassment unfounded; and one unknown-on-inmate sexual abuse unsubstantiated.

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.

GEO Policy 5.1.2-A and Guadalupe County Correctional Facility Policy 12.000 addresses PREA staff training requirements. Guadalupe County Correctional Facility employees receive PREA training annually through scheduled training and roll call. The PREA training curriculum was reviewed and verified that the training provided to employees is very comprehensive. Review of the lesson plan and slides demonstrated the training covered: zero-tolerance Policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The PREA Coordinator modifies GEO wide PREA training curriculum annually emphasizing areas identified as areas needing emphasis. 2017 PREA training emphasizes inmate searches. Employees sign an acknowledgement form that they have received and understood the PREA training they received during pre-service training. Staff interviewed were well versed in the GEO zero tolerance Policy; their responsibilities in reporting sexual abuse, sexual harassment, and staff negligence; first responder duties; and evidence preservation. The auditor reviewed documentation staff acknowledging they understood the 2015, 2016, and 2017 PREA training prior to the audit. The auditor randomly selected 20 staff training records, all 20 had documentation that they understood the PREA training in 2015 and 2016.

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.

The auditor reviewed GEO Policy 5.1.2-A, contractor and volunteer PREA training material; and contractor and volunteer training records and memorandum stating they understood the training. Interviews of the contractor and volunteer demonstrated their knowledge of PREA, their responsibilities, and the agency zero tolerance Policy. All contractors and volunteers who have contact with inmates have been trained

on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The auditor reviewed one volunteer, three contractors, and one contract monitor training packets, all had documentation they understood the training. The contractors receive the same training as staff.

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.

GEO Policy 5.1.2-A and NMCD Policy 150100 requires that all inmates receive PREA information upon arrival; PREA education within 30 days of intake (within 10 days by institutional Policy); and the information be provided in formats 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. The auditor reviewed inmate handbooks, posters and education documents.

The New Mexico Corrections Department PREA Resource Guide for Inmates is also in English and Spanish. It has a lot of good information to include defining PREA; New Mexico Corrections Department Zero Tolerance Policy; Reporting; phone numbers and address for victim advocates; investigation information; what to do if abused; and how to avoid sexual abuse in confinement. It is available to inmates upon request.

During the tour and interviews most inmates acknowledged the information being provided upon arrival and orientation, and posters displayed throughout the institution. The inmates interviewed knew the zero-tolerance policy; how and who to report to; and that they have the right to be free from retaliation for reporting such incidents. Prior to the audit, the auditor reviewed four examples of an inmate documenting receiving information and receiving comprehensive training; and randomly reviewed 19 additional inmate records onsite and during the report writing period. There was documentation all 19 had received information on arrival and comprehensive training during orientation. Three inmates were at the facility prior to PREA and they had documentation that they had received training in 2014.

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.

GEO Policy 5.1.2-A requires the facility investigator receives specialized training in addition to the general education provided to all employees. GEO PREA Coordinator attended the Moss Group “Train the Trainers Specialized Training; Investigating Sexual Abuse in Corrections Setting” sponsored by the PREA Resource Center. She then tailored the program for GEO investigators and is the instructor for all GEO investigator training. The auditor reviewed the specialized training for investigators, and it covered all requirements of the standard

to include: 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. Investigators have been trained. The agency maintains documentation that the investigator has received both the general and investigative PREA training. Three current investigators are trained, one was trained by New Mexico Department of Corrections Investigator training. The lesson plans, slides and sign in sheets were reviewed and interview of the investigator demonstrated good understanding of how to conduct a sexual abuse investigation in a confinement setting.

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.

GEO Policy 5.1.2-A outlines the training required for medical and mental health practitioners to include how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. The auditor reviewed training records prior to audit and the New Mexico Department of Corrections medical training plan used to train medical and mental health staff on specific medical and mental health PREA training. The auditor requested five randomly selected medical training records, all had documentation demonstrating they had received PREA and medical PREA training. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to 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. The five medical and mental health staff interviewed felt safe working at the facility. Medical staff does not conduct forensic medical examinations.

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.

GEO Policy 5.1.2-A and New Mexico Corrections Department Policy CD-150100 requires facilities to: conduct a screening for risks of sexual victimization and abusiveness within 24 hours of arrival; a follow-up screening for risks of sexual victimization and abusiveness within a set time period, not to exceed 30 days from the inmate's arrival at the facility; and reassesses inmate's risk level again 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. Guadalupe County Correctional Facility uses the New Mexico Corrections Department PREA screening tool and not the GEO PREA screening tool. The auditor reviewed three examples of inmate screening forms (initial screen and follow-up screen) prior to the audit. The auditor randomly selected 22 inmates and reviewed their screens during the on-site and report writing period. Of the

25 initial screening forms reviewed: 23 were screened within 24 hours of arrival; two were confined prior to the implementation of PREA and initial screens were conducted in July 2013. Of the 25 follow-on screening forms: 23 were screened within 30 days; and the two pre-PREA was done within 30 days of their initial screen. Guadalupe County Correctional Facility reassess the inmate's risk of victimization or abusiveness by using the GEO PREA reassessment screening tool which is based upon any additional, relevant information received by Guadalupe County Correctional Facility since the intake screening, and they ask the inmate if he has been sexually threatened or assaulted, if they are LGBTI, and do they feel at risk of sexual abuse. An inmate's risk level is also 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. The auditor reviewed one case of a reassessment based on sexual misconduct. The screening instrument is objective in determining if the inmate is at risk for victimization or abusiveness. During inmate interviews, most inmates who arrived within the last 12 months remembered receiving the PREA screen.

The auditor had three staff who conduct the screens perform the screen of the auditor to demonstrate the process of filling out the screening form. The process was done very professionally. Some information is provided through asking the inmate questions, others through review of inmate records. All the criteria referenced in the standard are on the form; and inmates are asked all of the questions required to be asked of the inmate except whether the inmate has a mental, physical or developmental disability, and whether they are intersex. Additionally, though the screener does make his/her own assessment of whether the inmate is gender non-conforming; majority of the screeners interviewed did not know the definition of gender nonconforming. The Corrective Action Plan is to train all staff who conduct screens on PREA definitions, specifically gender nonconforming, and practice identifying persons who are gender nonconforming. Provide the auditor documentation of such training; provide a minimum of eight weeks of screening following the training; and the auditor conduct follow-up interview with screeners.

New Mexico Corrections Department PREA Coordinator, GEO PREA Coordinator, and the auditors discussed the issues with the PREA screens. In reference to standard 115.41 (d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization to include: (7) whether the inmate is or is perceived to be intersex, or gender nonconforming; and 115.41 (e) The initial screening shall consider prior acts of prior convictions for violent offenses, and history of prior institutional violence or sexual abuse were not part of the screening form till approximately three months prior to the audit. The Corrective Action Plan was to provide staff training on gender non-conforming, provide a minimum of six weeks of screening following the training, and the auditor conduct follow-up interview with screeners. The facility provided the auditor screening forms for six weeks, and the auditor conducted phone interviews on June 30th. Guadalupe County Correctional Facility was found to be compliant with the standard.

Appropriate controls are implemented on the dissemination within Guadalupe County Correctional Facility of responses to questions asked pursuant to this standard to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

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.

GEO Policy 5.1.2-A and GEO Guadalupe County Correctional Facility Policy 08.005 outlines the use of the screening form to include: using the information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive; and making individualized determinations about how to ensure the safety of each inmate. GEO Policy 5.1.2-A and Guadalupe County Correctional Facility Policy 08.034 states the agency shall consider on a case-by-case basis whether to assign a transgender or intersex inmate to an institution for male or female inmates, housing and programming assignments, based on the inmate's health and safety, inmate's own views with respect to his or her own safety, and whether the placement would present management or security problems; reviewing twice a year placement and programming assignments for each transgender or intersex inmate to review any threats to safety experienced by the inmate; allowing transgender and intersex inmates the opportunity to shower separately from other inmates; and not placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such

placement is in a dedicated institution, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Through a review of screening forms, housing and program decisions, inmate and staff interviews, it was determined Guadalupe County Correctional Facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risk of being sexually victimized separate from those at high risk of being sexually abusive. The decisions are made on a case-by-case basis using information from the screen, assigned PREA classification, and good correctional judgment. The process is clearly defined in the policies and implemented in the use of PREA and classification forms through the Multi Discipline Treatment Team.

Inmates interviewed who identified as transgender or gay acknowledged they were treated with respect; were not housed in dedicated housing area; and transgender inmates were offered an opportunity to shower separately. Transgender or intersex inmate's own views with respect to his or her own safety are given serious consideration when making housing, programs and other decisions; and transgender and intersex inmates are given the opportunity to shower separately from other inmates.

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.

GEO Policy 5.1.2-A and New Mexico Corrections Department Policy CD-150100 states inmates at high risks for sexual victimization shall not be placed 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; if placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; that the facility shall document any access to programs, privileges, education, or work opportunities that was restricted, duration of restriction and why; and that every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Interviews of the Warden, PREA Compliance Manager, and segregation staff verified inmates at high risk of sexual victimization would not be placed in involuntary segregation unless other measures have been assessed. Other measures included moving housing areas or facilities. It was confirmed through Pre-Audit Questionnaire; investigative paperwork; and during interviews with the Warden, staff who supervise segregated inmates, and inmates; that no inmates at high risk for sexual victimization had been placed in involuntary segregated housing during the past 12 months prior to the audit. GEO documents any review of alternatives using a form that addresses possible alternatives reviewed prior to placing inmates at high risks for sexual victimization shall not be placed in involuntary segregated housing. The auditor reviewed the form that was in every investigation file he reviewed. Though no inmates were involuntarily placed in segregation, one did request protective custody.

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.

Guadalupe County Correctional Facility inmate handbook, PREA handouts, and posters throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Interviews of inmates and staff and review of investigations verified inmates knew of and used multiple internal and external ways to report incidents of abuse or harassment, and retaliation. Inmates can report verbally and in writing to staff; through a third party, grievance, and statewide hotline. The auditor tested the statewide hotline from two housing area inmate phones.

GEO Employees reporting Sexual Abuse or Sexual Harassment may report such information to the Chief of Security or facility management privately if requested. They may also report Sexual Abuse or Sexual Harassment directly to the GEO Employee Hotline, which is an independent, professional service, available 24 hours per day, 7 days a week on the Internet at www.reportlineweb.com/geogroup or at the toll-free phone number (866) 568-5425. Employees may also contact the Corporate PREA Director directly at (561) 999-5827.

Examples of inmate reporting through different means were reviewed when investigative cases were reviewed. Staff accepts reports made verbally, in writing, anonymously, and from third parties, and are promptly documenting any verbal reports.

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.

Review of GEO Policy 5.1.2-A, Inmate Handbook, and grievances. Guadalupe County Correctional Facility does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse; does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse; ensures that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint; and issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. 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 inmates. The auditor reviewed a PREA grievance from 2016 and 2015.

The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith.

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.

GEO Policy 5.1.2-A, states inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations; and the facilities shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. Information is provided to the inmates through various means from fliers to posters throughout the facility.

Guadalupe County Correctional Facility has a MOU with Solace Crisis Treatment Center for outside confidential support services. This MOU is part of the New Mexico Corrections Department and New Mexico Coalition of Sexual Assault Programs, Inc. bigger agreement coordinated by the New Mexico PREA Coordinator. The inmates can simply dial *9999 or write to the Solace Crisis Treatment Center, or the case manager can make the call. There are documentation inmates are offered the opportunity to talk to the victim advocate with each PREA incident.

The auditor tested the phone in the housing unit during the audit. He was connected with a victim advocate who was very professional and stated if needed could be connected to a Spanish speaking victim advocate. This was one of the better victim advocate service the auditor has interviewed.

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.

GEO Policy 5.1.2-A establishes a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. GEO websites outlines GEO methods to receive third party reports of sexual abuse and sexual harassment. GEO website provides a number and mailing address. Posted PREA fliers also provide third party reporting information. Discussion with inmates demonstrated they knew how third-party reporting could be accomplished.

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.

GEO Policy 5.1.2-A and employee handbook require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. Health practitioners during interviews stated they are required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Review of investigative files; and interviews of staff verified staff immediately report to the facility's designated investigator any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Interviews with inmates and staff did not reveal any incident of sexual abuse or harassment not reported to the facility's designated investigator.

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.

GEO Policy 5.1.2-A requires staff to take immediate action to protect any inmate they learn is subject to substantial risk of imminent sexual abuse. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security staff immediately employs protection measures as the information is passed to the Investigator, PREA Compliance Manager and Warden. Per the interview with the PREA Compliance Manager and Warden, no inmate has reported substantial risk of imminent sexual abuse. The Pre-Audit Questionnaire reported no cases of inmates at substantial risks of imminent sexual abuse in the last 12 months. The facility did provide a case from 2015 where the inmate was not placed in protective custody but was placed temporarily in the medical cell after returning from the hospital only after looking at other alternatives. The facility uses a good checklist of demonstrating they have looked at different alternatives.

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.

GEO Policy 5.1.2-A requires when an allegation that an inmate was sexually abused while confined at another institution, the Warden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation; that all sexual abuse allegations reported by another institution regarding any inmate that was confined at the Guadalupe County Correctional Facility be fully investigated. Interviews with the Warden, PREA Compliance Manager, and investigator confirmed their knowledge of the policies and responsibilities to report any allegations by an inmate they had alleged to have happened at another facility and investigate any allegations that may have occurred at Guadalupe County Correctional Facility that was reported by another facility. Auditor was provided a memorandum stating there was no allegation that an inmate was sexually abused while confined at another institution in 2016 or 2017. They did provide an example from 2015 where they provided the information to the other Warden of the other facility. There was an example

from October 2016 of another facility reporting an inmate reported being assaulted while at Guadalupe County Correctional Facility, the facility is under investigation of the FBI and includes a number of facilities the Doctor worked at.

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.

GEO Policy 5.1.2-A outlines procedures to respond to an allegation of sexual abuse for both security and non-security staff. There is a GEO Incident Checklists to be used when responding to sexual abuse or sexual harassment. Random interviews with security and non-security staff confirmed both security and non-security staff were very knowledgeable what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser; how to preserve the crime scene; and what actions inmates should not take in order not to destroy physical evidence. Per interviews and policy; the first security staff member to respond to an allegation that an inmate was sexually abused shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Staff have a card they carry that describes the steps a first responder would take.

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.

GEO Policy 5.1.2-A requires facilities 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. The facility written institutional plan is a series of checklists that coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and review of the Sexual Abuse Incident Checklists, investigative and medical files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities. Investigative files had copies of these documents filled out when each action was taken.

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.

GEO Policy 5.1.2-A addresses collective bargaining units and states in every case remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation. Guadalupe County Correctional Facility has no collective bargaining agreement. Review of investigations demonstrates that Guadalupe County Correctional Facility will separate the victim from the accused staff member in both sexual abuse and harassment usually by placing the staff member in a position where there would be no contact with the inmate. If the abuser was an inmate, he is normally moved to another housing unit. The auditor review of investigations provided documentation of cases where staff was moved to a non-contact position, on administrative leave or not working in the special housing unit during the investigation.

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.

GEO Policy 5.1.2-A require a staff member be designated to monitor for retaliation against staff or inmates who reported or had been sexually abused or harassed; provided multiple protection measures for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations; monitoring the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff; and conducting periodic status checks through interviews at least every seven days. Through review of the retaliation log and interviews of the monitors and New Mexico PREA Coordinator: Guadalupe County Correctional Facility staff conducts periodic status checks; New Mexico PREA Coordinator checks inmate records for housing changes, disciplinary actions, etc. In both cases the meetings and checks are extensive and documented. Investigations reviewed had documented weekly periodic face to face status checks. If the New Mexico PREA Coordinator notices something in the inmate record she immediately contacts the facility PREA Compliance Manager.

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.

GEO Policy 5.1.2-A states, involuntary segregated housing for inmates who have alleged to have suffered sexual abuse may be used only after an assessment of all available housing alternatives has shown there are no other means of protecting the inmate; and use of protective custody to protect alleged victim is only used as a last resort for a very short time. If placed in segregated housing involuntarily they shall have access to programs, privileges, education, and work opportunities to the extent possible; and that the institution shall document any access to programs, privileges, education, or work opportunities that was restricted and that every 30 days, the institution shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. There were no inmates who have alleged to have suffered sexual abuse in protective custody during the on-site audit. Interviews of the Warden, PREA Compliance Manager, staff and inmates, there were no instances of using segregation housing to protect inmates who had alleged to have been sexually abused in the last 12 months. They also stated alternate protective measures would be used in lieu of protective custody and if they had to place an inmate in segregated housing involuntarily they would have access to programs, privileges, education, and work opportunities to the maximum extent possible. With each allegation, a check sheet of options for housing is completed on each alleged victim. None of those reviewed resulted in an involuntary segregation placement.

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.

Based on review of GEO Policy 5.1.2-E, New Mexico Corrections Department Policy CD-150100, and PREA investigations reviewed; interviews of Guadalupe County Correctional Facility Warden, PREA Compliance Manager, and investigators it was determined an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Guadalupe County Correctional Facility conducts its investigations using uniform evidence protocols. Three current investigators are trained, one was trained by New Mexico Department of Corrections Investigator training, and the other two with the GEO Investigator training.

Based on the tracking logs there were no allegations in 2017 (January and February), five in 2016, and 14 in 2015. Prior to the audit the facility provided the auditor one case from 2016, and two from 2015. During the on-site and interim report writing period the auditor requested and reviewed three specific cases from 2016 and two from 2015. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the eight cases reviewed by the auditor: one staff-on-inmate sexual abuse substantiated; one staff-on-inmate sexual abuse unsubstantiated; two staff-on-inmate sexual abuse unfounded; one staff-on-inmate sexual harassment still open at the time of the audit; one inmate-on-inmate sexual harassment unsubstantiated; one inmate-on-inmate sexual harassment unfounded; and one unknown-on-inmate sexual abuse unsubstantiated.

The investigator stated that he collects the appropriate direct and circumstantial evidence, reviews the video tapes, interviews the alleged victim, suspected perpetrators, and witnesses. He also reviews prior complaints and reports of sexual abuse involving the suspected perpetrator. All investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The Investigator also stated that the credibility of the victim, suspect, or witness is always assessed on an individual basis. Polygraphs are not used in PREA investigations.

When conducting administrative investigations, the investigator always decides whether staff actions or failures to act contributed to the abuse.

The departure of the alleged abuser or victim from the employment or control of Guadalupe County Correctional Facility or agency shall not
PREA Audit Report

provide a basis for terminating an investigation. Per Policy GEO retains all written investigation reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; however, for any circumstance, files shall be retained no less than ten years.

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.

A review of GEO Policy 5.1.2-E and investigations; and interviews with the investigator and administrative staff confirm the Guadalupe County Correctional Facility and the New Mexico Office of Professional Standards has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

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.

GEO Policy 5.1.2-A requires facilities to inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if investigated by an outside agency, request the outside investigative agency inform the inmate as to whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated, or unfounded; if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate’s unit, no longer employed at the institution, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate be whenever the alleged abuser has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; and that all notifications will be documented.

Prior to the audit, Guadalupe County Correctional Facility provided copies of notifications to the inmates from 2015, 2016, and 2017. All notifications from the last 12 months were reviewed by the auditor. Notifications were timely and well documented using the GEO form.

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.

Per GEO Policy 5.1.2-E, GEO employee handbook, and interviews with staff: staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. There was no substantiated PREA findings involving staff in the last 12 months. There was one case in 2015 where the staff resigned during the investigation.

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.

GEO policies 5.1.2-A and 5.1.2-E prohibit contractors or volunteers who engaged in sexual abuse to have contact with inmates and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers in 2016 or 2017. There was one unfounded case in 2015. There is a case against under investigation of the FBI. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.

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.

Per review GEO policies 5.1.2-A and 5.1.2-E, and interviews with Guadalupe County Correctional Facility staff, inmates are subject to disciplinary sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse; sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories; and considers

whether an inmate's mental disabilities or mental illness contributed to his or her behavior. New Mexico Corrections Department Policy 090101.C provides inmate offense and sanctions for offenses. New Mexico Corrections Department prohibits all sexual activity between inmates and discipline inmates for such activity. In the 12 months prior to the audit there have been no substantiated finding and disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse. An example of disciplinary sanctions for sexual misconduct (2015) was provided for the auditor review. The sentence for sexual misconduct was 30 days disciplinary segregation, 90 days loss of good conduct time, and 60 days loss of phone privileges.

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.

GEO Policy 5.1.2-A requires all new inmates receive a PREA screen upon arrival, along with a medical and mental health screen. If any of these identify someone as having experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community, they will be offered a medical and mental health follow-up meeting within 14 days. Prior to and during the audit, reviewed PREA screens and medical and mental health records, it was determined inmates who reported prior sexual victimization (five cases) or previously perpetrated sexual abuse (three cases) were offered consults with medical and mental health practitioners within 14 days of the screen. Three of the five who had been victimized and one of the three who abused someone sexually accepted the referral. Interviews of medical and mental health staff confirmed follow-up meetings would be scheduled and conducted. Interview of inmates who previously experienced prior sexual victimization reported they were offered medical and mental health consultation. Interviews of medical and mental health staff confirmed any information related to sexual victimization or abusiveness that occurred in the institution is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

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.

GEO Policy 5.1.2-A states inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Qualified medical practitioners are on duty 24 hours. Upon returning from the hospital a nurse evaluates and documents the inmate's health status, and refers the inmate for mental health services. The inmate is prioritized for sick call and if the emergency room does not complete testing sexually transmitted diseases, testing is done at the facility. Per GEO Policy 5.1.2-A requires

inmate victims of sexual abuse shall receive timely, unimpeded access to outside emergency medical exams without financial costs. The services at no costs are provided regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Forensic exams are done for up to 96 hours since the time of the incident. There has been no forensic exam in 2016 or 2017. Documentation from a 2015 case that a forensic exam was performed by a SANE was reviewed by the auditor.

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.

Based on review of GEO Policy 5.1.2-A and medical and mental health documentation; and interviews with staff and inmates demonstrate Guadalupe County Correctional Facility offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Guadalupe County Correctional Facility provides victims with medical and mental health services consistent with the community level of care. Based on documentation and interviews of mental health staff, mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning such abuse. Per interview of mental health staff, Guadalupe County Correctional Facility does not have a sex offender program but will offer inmates who have been sexually victimized or sexual abused someone general mental health counseling.

Standards 115.83 (d) and (e) are non-applicable as Guadalupe County Correctional Facility is a male only facility.

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.

GEO Policy 5.1.2-A identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews to include a form the review team uses that addresses whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff. The auditor reviewed a 2015 and 2016 incident review prior to the audit, and reviewed one incident review that were required for the five investigations reviewed on-site or during the interim report writing period. Three of the other cases were unfounded, and one was still pending investigation. The review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. GEO has an excellent PREA after action review form that addresses all elements of the standard.

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.

GEO Policy 5.1.2-A requires the collection of uniform data that provides the minimum data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument. GEO collects accurate uniform data for every allegation of sexual abuse at facilities under its control using standardized instruments. GEO facilities provide monthly reports and PREA surveys to GEO headquarters. A monthly PREA Incident Tracking log is used to collect and provide the GEO PREA Coordinator data on sexual abuse and harassment incidents. Per conversation with GEO staff the data is aggregated. Upon request from DoJ, GEO provides the data. The auditor reviewed three Guadalupe County Correctional Facility monthly PREA tracking log, and GEO 2014 and 2015 annual PREA report. Review of 2014 and 2015 DoJ Survey of Sexual Violence reports, 2015 annual agency PREA reports, and data submitted by the institution demonstrated the agency collects uniform data to be used by GEO and New Mexico Corrections Department.

GEO does not contract its inmates to other facilities (115. 87 (e)).

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.

GEO Policy 5.1.2-A requires GEO to review the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. It is then provided to the agency contracted with, who produces an annual report with comparisons from previous years and corrective actions, and posted on that agency website.

The GEO annual report is very comprehensive in scope, provides data, an assessment of its PREA program and areas of focus, and includes the agency's progress in meeting the PREA Standards. The GEO home page has a PREA link to its PREA page that lists its PREA related policies, reporting information, and the GEO annual report. The auditor previously reviewed the GEO 2013, 2014, and 2015 PREA annual reports. GEO continues to publish one of the better annual reports the auditor has reviewed. The GEO PREA annual report includes a comparison of current and previous year data; an assessment GEO's effectiveness of its sexual abuse prevention, detection, and response policies and actions to eliminate sexual abuse and sexual harassment. The GEO website PREA tab is easy to find, and is very informative.

The 2015 New Mexico annual PREA reports was reviewed. It is a very good in-depth report and the Guadalupe County Correctional Facility data was listed in the report.

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)

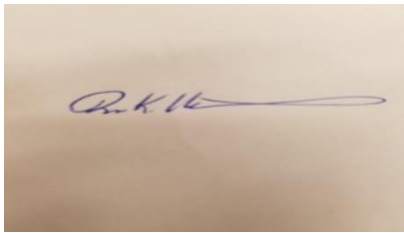
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Review of GEO Policy 5.1.2-A, website, storage of documents at the facility, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities is available to the public through its website. All GEO institution data is in the annual report and posted on the website, only the last report is posted. GEO maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection in accordance with the GEO Retention Records Schedule. Before making aggregated sexual abuse data publicly available, GEO removes all personal identifiers.

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.



Auditor Signature

September 24, 2017

Date