

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 27 September 2017

Auditor Information			
Auditor name: David K. Haasenritter			
Address: 3121 Terra Springs Drive, Fredericksburg, VA 22408			
Email: davidkhaasenritter@gmail.com			
Telephone number: 540-903-6457			
Date of facility visit: March 9-10, 2017			
Facility Information			
Facility name: Northeast New Mexico Detention Facility			
Facility physical address: 185 Dr. Michael Jenkins Road, Clayton, NM 88415			
Facility mailing address: <i>(if different from above)</i> Same as above			
Facility telephone number: 575-374-4005			
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: Timothy B. Hatch			
Number of staff assigned to the facility in the last 12 months: 230			
Designed facility capacity: 654			
Current population of facility: 559			
Facility security levels/inmate custody levels: Level III Inmates			
Age range of the population: 18-80			
Name of PREA Compliance Manager: Rebecca Hatch		Title: Compliance Administrator	
Email address: rhatch@geogroup.com		Telephone number: 575-374-4005 ext 1010	
Agency Information			
Name of agency: The GEO Group, Inc			
Governing authority or parent agency: <i>(if applicable)</i> New Mexico Corrections Department			
Physical address: One Park Place, Suite 700, 621 NW 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 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 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 Northeast New Mexico Detention Facility was conducted on March 8-10, 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 Northeast New Mexico Detention 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. The New Mexico Corrections Department website provides good PREA information.

Following the entrance meeting with staff, the auditor toured the facility on March 8, 2017 and went back to certain areas in the institution on March 9-10, 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 auditors 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, 25 specialized), and two New Mexico Department of Corrections staff (on-site monitor and PREA Coordinator). 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 28 inmates were formally interviewed: 28 random interviews and 14 specialized interviews (LGBTI (4), who disclosed sexual victimization during screening (5); who reported sexual abuse while confined (2), deaf (1), and limited English (2)). The auditor also interviewed two inmates who wrote letters to the auditor prior to the audit. 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 auditors found the inmates very aware of PREA.

Mr. Rob Walling (GEO PREA office) and Ms. Jillian Shane New Mexico Corrections Department PREA Coordinator was present during the audit and was very helpful during the audit. The New Mexico Corrections Department liaison to Northeast New Mexico Detention 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 Guadalupe County 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.

Prior to the audit, the facility provided the auditor one PREA case from 2014, 2015, and 2016. During the on-site and interim report writing period the auditor requested and reviewed 16 specific cases. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the 16 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; two staff-on-inmate sexual harassment unfounded; two inmate-on-inmate sexual abuse unsubstantiated; and one inmate-on-inmate sexual abuse unfounded. There were seven staff-on-inmate sexual abuse open; five under investigation by the FBI with the same alleged abuser (medical contractor).

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 Northeast New Mexico Detention 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

The Northeast New Mexico Detention Facility is a 179,264 square foot private prison located on 70 acres. It is located 4 miles east of Clayton New Mexico, between State Highway 7 and State Highway 56/64. This level III state facility is owned by the town of Clayton and operated by the GEO Group, Inc. Construction of Northeast New Mexico Detention Facility began in 2006, and Northeast New Mexico Detention Facility received its first inmates on August 4, 2008. Count on the first day of the audit was 561 (one female inmate)

Northeast New Mexico Detention Facility is comprised of two main buildings; the Administration Building which contains business support functions, Northeast New Mexico Detention Facility armory, Northeast New Mexico Detention Facility training room, employee wellness center, Senior Administrative staff offices, conference room, inmate records room, video and phone monitoring room and the main control room. The Administration building is located outside the secure perimeter. The second building, which is located inside the secure perimeter, contains inmate housing and programming areas. Additionally it contains the intake area, the secondary control center, supply/warehouse, laundry, food service, warehouse, a staff dining hall, visitation, medical, unit management staff and offices, security and segregation.

Northeast New Mexico Detention Facility has one support building which houses the physical plant management team. Housing Unit One and Housing Unit Two each have one control center. Each unit has 146 double bunked general population cells split on two levels. Housing Units One and Two are connected to the two service buildings by an activity unit. Housing Unit Three (segregation) has 41 single bunked cells split on two levels.

Northeast New Mexico Detention Facility contains one gym, one commissary, three mental health offices, and one residential drug and alcohol activity room, one education resource center, eight case worker offices, one computer lab, a facility chapel, six standard classrooms and three vocational classrooms.

Outdoor general population recreation areas consist of two basketball courts, four handball courts, and a softball field and weight equipment. Segregation outdoor recreation areas are covered in the event of inclement weather.

GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted to GEO's care.

Northeast New Mexico Detention Facility mission is to maintain a level of security such that the safety of the public is maintained as well as the safety of the facility's 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 an environment that provides for the rehabilitation of all inmates.

SUMMARY OF AUDIT FINDINGS

On March 8-10, 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, all standards requiring corrective action (two) was corrected. On April 24, 2017, the Northeast New Mexico Detention Facility was found in full compliance:

Number of standards exceeded: 5

Number of standards met: 37

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 Northeast New Mexico Detention 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. Northeast New Mexico Detention 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. Northeast New Mexico Detention 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 Northeast New Mexico Detention Facility a safer facility to be confined and work at.

Ms. Rebecca Hatch is the Northeast New Mexico Detention Facility PREA Compliance Manager, who reports to the Associate Warden for PREA. She was very knowledgeable of PREA standards, 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 Northeast New Mexico Detention Facility organizational chart demonstrated she had the authority to coordinate the facility's efforts to comply with PREA. During the audit, Ms. Hatch demonstrated her outstanding knowledge of PREA, facility operations, and PREA plan; and authority to coordinate and work issues.

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 Clayton County. The contract was signed in 2006. 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 Northeast New Mexico Detention Facility staffing plan; and 2014, 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. Each annual assessment was thoroughly done resulting in modifications either in staffing, cameras, or mirrors. The 2016 annual review took into account, half of the staff-inmate PREA allegations were as a result of the medical contractor, all of which are still under investigation and involves other facilities the medical contractor worked at.

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 uses overtime

to fill all its positions in the plan.

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, and duty officer report. The duty officer report documents checking for: 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 19 logs and duty officer reports that covered all shifts. Staff and inmate interviews further confirmed the unannounced rounds by supervisors.

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 Clayton County 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, and a report of each inmate age and date arrived demonstrated 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 Northeast New Mexico Detention Facility Policy 08.008 Search of Inmates and Search of Areas, review of GEO training material, interview of staff and inmates, and observation it was determined the facility limits cross-gender viewing and searches. Northeast New Mexico Detention 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. Based on interviews of staff and female inmate (only one county inmate during audit), and logs; only female staff conduct searches of female inmates. Female staff are present on all shifts, and female inmates are not being restricted from programs and out of cell opportunities.

Based on review of GEO Policy 5.1.2-A and Northeast New Mexico Detention 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 (115.15(d)). Most inmates interviewed stated they could shower and change clothes without being observed by opposite gender staff. Observation during the audit identified male inmates were not able to shower and perform bodily functions in housing units 1A, 1B, 1D, 2A, 2B, 2D (showers) when staff walk up the stairs near the showers; and when using the outside recreation yard toilet. The facility corrected one of the housing units' showers and the outside recreation yard toilet for review by the auditor prior to the end of the on-site audit. The Corrective Action Plan was to duplicate the barrier on the stairs the auditor reviewed in the five housing areas to be modified so inmates are able to shower or perform bodily functions without non-medical staff observing their genitalia or buttocks. Provide the auditor photos of those areas within 60 days of the on-site audit being completed. Photos of all areas was provided to the auditor within 30 days. 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 were done professionally and was not rushed to simply meet a standard. Northeast New Mexico Detention Facility was found to be compliant with the standard.

Based on review of GEO Policy 5.1.2-A and Northeast New Mexico Detention 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 a male inmate housing unit. Logs and interviews of staff and inmates demonstrated female security staff announce at the beginning of the shift. The policy changes and training was conducted during the on-site audit. The Corrective Action Plan was for the Northeast New Mexico Detention 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. Northeast New Mexico Detention 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 interviewed four staff following 40 days of implementation of announcing. Northeast New Mexico Detention Facility was 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. Northeast New Mexico Detention 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. All staff interviewed defined transgender and intersex inmates and described or performed the proper pat search procedures of a transgender inmate correctly. The transgender inmate during the interview said the staff did a professional job of pat searching.

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 and Northeast New Mexico Detention Facility Policy 12.000 ensure inmates with disabilities and who are limited English proficient have access to PREA information and programs. GEO, New Mexico Corrections Department, and Northeast New Mexico Detention 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. Five staff are designated as Spanish translators, who provide foreign language translation and assistance. The auditor used two of the designated staff translators for interviews. 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. Based on staff and inmate interviews 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. The auditor interviewed an inmate who was deaf, and was supported by a staff member who normally works with the inmate. The inmate reads lips and stated PREA information was provided to him in writing and explained.

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 Northeast New Mexico Detention 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 and promotion packets and one contractor packet before the audit and randomly reviewed four 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 30 employee and contractor background checks during and following the on-site audit, 29 employees and two contractors had up to date background checks. The one employee packet was pending approval. Process for maintaining background checks were in place.

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 Northeast New Mexico Detention 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 30 random staff annual reviews during the on-site and interim report writing period. All but two who had not been hired in the last 12 months had two consecutive annual reviews.

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 Northeast New Mexico Detention 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.

Overall the Northeast New Mexico Detention Facility human resource files, process and interviews were one of the best this auditor has audited and it was obvious processes were in place and followed to comply with PREA requirements.

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 Northeast New Mexico Detention Facility Policy 12.000; 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. Northeast New Mexico Detention Facility has 98 cameras, five resulting from the review of the annual staffing plan.

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.

Northeast New Mexico Detention 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 Tri-County Community Services Inc. to have a MOU with Northeast New Mexico Detention Facility to provide services that includes: victim advocate services and support through medical exam process and investigator interviews, provide emotional support, crisis intervention, information, and referrals. The auditor reviewed documentation of a Spanish speaking victim advocate was provided. The auditor called the victim advocate number from the inmate phones in the housing unit.

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.

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. Northeast New Mexico Detention Facility has a MOU with Christus St. Vincent Medical Center Santa Fe for a Sexual Assault Nurse Examiners (SANEs) to perform the forensic exam. There were no forensic exams in the last 12 months, but the auditor was provided documentation of one examples in 2014. A forensic exam was provided by a SANE. 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, New Mexico Corrections Department Policy CD-150102, and Northeast New Mexico Detention Facility Policy 12.000 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.

Prior to the audit, the facility provided the auditor one PREA case from 2014, 2015, and 2016. During the on-site and interim report writing period the auditor requested and reviewed 16 specific cases. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the 16 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; two staff-on-inmate sexual harassment unfounded; two inmate-on-inmate sexual abuse

unsubstantiated; and one inmate-on-inmate sexual abuse unfounded. There were seven staff-on-inmate sexual abuse open; five under investigation by the FBI with the same alleged abuser (medical contractor).

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 Northeast New Mexico Detention Facility Policy 12.000 addresses PREA staff training requirements. Northeast New Mexico Detention 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; evidence preservation, and conducting proper and professional searches to include pat searches of transgender inmates. The auditor reviewed documentation staff acknowledging they understood the 2014, 2015, and 2016 PREA training prior to the audit. The auditor randomly selected 36 staff training records, 30 had documentation that they understood the PREA training in 2015 and 2016, six (6) new employees had documentation for 2016 only.

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 two contractors and two volunteers 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. Prior to the audit, the auditor reviewed one volunteer, one contractor training documentation demonstrating they understood the

PREA training. During the audit the auditor randomly selected and reviewed two volunteers and two contractor records on site, all have 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, Northeast New Mexico Detention Facility Policy 12.000, and NMCD Policy 150100 requires that all inmates receive PREA information upon arrival; PREA education within 30 days of intake (within seven 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 during orientation; and the information I provided through handbooks pamphlets, and the PREA video. Posters are 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 three examples (one from 2014, 2015, and 2016) of an inmate documenting receiving information and receiving comprehensive training; and randomly reviewed 23 additional inmate records onsite and during the report writing period. There was documentation 20 had received information on arrival and comprehensive training during orientation and three inmates were at the facility prior to PREA and they had documentation that they had received training in 2014. The limited English and deaf inmates interviewed acknowledged the information was provided in formats that they could be understood.

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. There are two designated PREA investigators and the auditor reviewed their training records which documented both annual PREA training and PREA investigator training. Additionally, 12 other staff received the GEO PREA investigative training. The agency maintains documentation that the investigators has received both the general and investigative PREA 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. Two investigators were interviewed, both very knowledgeable of PREA investigations.

Standard 115.35 Specialized training: Medical and mental health care

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

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

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 three training records prior to audit and the GEO 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. 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. Northeast New Mexico Detention 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, all screens were done IAW timeline requirements. The auditor randomly selected 25 inmates and reviewed their screens during the on-site and report writing period. Of the 25 initial screening forms reviewed: 22 were screened within 72 hours of arrival; two

were confined prior to the implementation of PREA and initial screens were conducted in July 2013; and one was not done within 72 hours. Of the 25 follow-on screening forms: 22 were screened within 30 days; and the two pre-PREA was done within 30 days of their initial screen, one screen was more than 30 days since the initial screen. 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 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. 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 and the auditor will conduct follow-up interview with screeners. Northeast New Mexico Detention Facility Policy 12.000 provided documentation of training and staff who do screens were interviewed. Staff knew the definition of gender nonconforming.

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 November 2016, approximately three months prior to the audit. The Corrective Action Plan was to provide the auditor for six weeks two screens per week to verify the correct screening form is being used. The facility provided the auditor screening forms for six weeks. Northeast New Mexico Detention Facility was found to be compliant with the standard.

Appropriate controls are implemented on the dissemination within Northeast New Mexico Detention 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 Northeast New Mexico Detention Facility Policy 12.000 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 Northeast New Mexico Detention Facility Policy 12.000 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 Northeast New Mexico Detention 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, Northeast New Mexico Detention Facility Policy 12.000, 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 from the investigative files.

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.

Northeast New Mexico Detention 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, statewide hotline, and PREA Report Office Colorado Springs (not part of agency). The auditor tested the statewide hotline

from two housing area inmate phones, and the facility was immediately notified.

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.

Review of investigations demonstrated inmates know of and use different reporting methods. 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. Northeast New Mexico Detention 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 two PREA grievances, and there were no emergency grievances.

Northeast New Mexico Detention Facility 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.

Northeast New Mexico Detention Facility has a MOU with Tri County Community Services, Inc. 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. The auditor reviewed documentation inmates were offered the opportunity to talk to the victim advocate following a PREA incident.

The auditor dialed *9999 from two housing units and was connected with a victim advocate who was very professional and stated if needed could be connected to a Spanish speaking victim advocate. The auditor was impressed with the system the New Mexico PREA Coordinator and New Mexico Coalition of Sexual Assault Programs, Inc established. The Tri County Services Inc staff was very professional and knowledgeable about PREA.

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. Interviews 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, Northeast New Mexico Detention Facility Policy 12.000, 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.

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 Northeast New Mexico Detention 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 Northeast New Mexico Detention Facility that was reported by another facility. There were five cases during the last 12 months where an inmate while confined at Northeast New Mexico Detention reported a PREA incident at another facility; and two cases where an inmate while at another facility reported a PREA incident while at Northeast New Mexico Detention during the audit cycle. The auditor reviewed notification to another facility when an inmate alleged sexually abused while confined at another institution; and one case where another facility contacted Northeast New Mexico Detention Facility of an inmate reporting sexual abuse while at Northeast New Mexico Detention Facility, case is under investigation by the FBI.

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)

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 Northeast New Mexico Detention Facility Policy 12.000 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. Staff have a card they carry that describes the steps a first responder would take. 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. Based on staff and inmate interviews, and review of policy and investigations; 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. Inmate interviewed who reported sexual abuse was positive of the response of the facility staff.

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 and Northeast New Mexico Detention Facility Policy 12.000 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 Northeast New Mexico Detention Facility PREA Coordinated Response Plan coordinates actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The plan includes a checklist which is used during PREA incidents. Interviews with staff (first responders, medical and mental health practitioners, investigators, and institution leadership), and review of investigative files confirmed staff were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities.

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. Northeast New Mexico Detention Facility has no collective bargaining agreement. Based on staff interviews, and review of Northeast New Mexico Detention Facility Policy 12.000 and investigations demonstrates that Northeast New Mexico Detention 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.

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 and Northeast New Mexico Detention Facility Policy 12.000 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. Mental health staff is designated for monitoring inmates and Human Resource Manager for monitoring staff. Through review of the retaliation logs (three prior to audit and six during on-site audit) and interviews of the staff who monitors, New Mexico PREA Coordinator and one inmate who was monitored: Northeast New Mexico Detention Facility staff conducts periodic status checks with the inmate every seven days; New Mexico PREA Coordinator checks inmate records for housing changes, disciplinary actions, etc. In both cases the meetings and checks are extensive and documented. If the New Mexico PREA Coordinator notices something in the inmate record she immediately contacts the facility PREA Compliance Manager. The inmate interviewed stated the weekly monitoring was done, and he felt it was taken seriously.

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 and Northeast New Mexico Detention Facility Policy 12.000 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, segregation supervisor 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. The auditor reviewed six random check sheets of options for housing is completed on the 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, Northeast New Mexico Detention Facility Policy 12.000, and PREA investigations reviewed; interviews of Northeast New Mexico Detention 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. Northeast New Mexico Detention Facility conducts its investigations using uniform evidence protocols. There are two designated PREA investigators and the auditor reviewed their training records which documented both annual PREA training and PREA investigator training. Additionally, 12 other staff received the GEO PREA investigative training.

Prior to the audit, the facility provided the auditor one PREA case from 2014, 2015, and 2016. During the on-site and interim report writing period the auditor requested and reviewed 16 specific cases. All the cases were referred to the appropriate investigative agency, and investigations were properly conducted.

Of the 16 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; two staff-on-inmate sexual harassment unfounded; two inmate-on-inmate sexual abuse unsubstantiated; and one inmate-on-inmate sexual abuse unfounded. There were seven staff-on-inmate sexual abuse open; five under investigation by the FBI with the same alleged abuser (medical contractor).

The two investigators interviewed stated they collect direct and circumstantial evidence, review the video tapes, interviews the alleged victim, suspected perpetrators, and witnesses. They also review prior complaints and reports of sexual abuse involving the suspected perpetrator. Each investigative file was well organized and complete. All investigations are well 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 Investigators 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 Northeast New Mexico Detention Facility or agency shall not 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, Northeast New Mexico Detention Facility Policy 12.000, and investigations; and interviews with the investigator and administrative staff confirm the Northeast New Mexico Detention Facility has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The Northeast New Mexico Detention Facility investigators were very knowledgeable of the investigative process and standard for determining whether an allegation of sexual abuse or sexual harassment are substantiated. They also had a good understanding of the difference between unsubstantiated and unfounded.

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 and Northeast New Mexico Detention Facility Policy 12.000 requires the inmate to be informed 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, Northeast New Mexico Detention Facility provided copies of notifications to the inmates from 2014, 2015, and 2016. On site the auditor reviewed notifications for all the cases reviewed on-site or during the interim report writing period, and found all 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, Northeast New Mexico Detention Facility Policy 12.000, 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. The auditor reviewed one case in 2016 where the staff resigned during the investigation, and law enforcement and medical board was informed of the cases involving a medical contractor.

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, and Northeast New Mexico Detention Facility Policy 12.000 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 and PAQ reported that there have been no substantiated allegations of sexual abuse by contractors or volunteers in the last 12 months. There is an on-going FBI case against a medical contractor. Law enforcement and medical board was informed of the cases involving a medical contractor. 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, Northeast New Mexico Detention Facility Policy 12.000; and interviews with Northeast New Mexico Detention 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. Northeast New Mexico Detention Facility 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.

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 and Northeast New Mexico Detention Facility Policy 12.000 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, the auditor reviewed six PREA screens and medical and mental health records, it was determined inmates who reported prior sexual victimization or previously perpetrated sexual abuse were offered consults with medical and mental health practitioners within 14 days of the screen. One inmate interviewed who reported being victimized during the screen stated he was offered a mental health referral, and he was very positive of the mental health services he was provided. Interviews of medical and mental health staff confirmed follow-up meetings would be scheduled and conducted, 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 and Northeast New Mexico Detention Facility Policy 12.000 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. The medical and mental health staff interviewed explained the process to include that the alleged victim is first taken to the facility medical area where they receive life threatening first aid pending transfer to Christus St. Vincent Medical Center Santa Fe for a Sexual Assault Nurse Examiners (SANEs) to perform the forensic exam. Upon returning from the hospital a nurse evaluates and documents the inmate’s health status, and refers the inmate for medical and 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 and Northeast New Mexico Detention Facility

Policy 12.000 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 the last 12 months. Documentation from a 2014 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, Northeast New Mexico Detention Facility Policy 12.000, and medical and mental health documentation; and interviews with staff and inmates demonstrate Northeast New Mexico Detention Facility offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Northeast New Mexico Detention 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, Northeast New Mexico Detention Facility does not have a sex offender program but will offer inmates who have been sexually victimized or sexually abused someone general mental health counseling.

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 and Northeast New Mexico Detention Facility Policy 12.000 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 2014 and 2016 incident review prior to the audit, and reviewed three incident reviews on-site that were randomly chosen from within the last 12 months. 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. The interviews were very thorough and during the interviews the review team members were very knowledgeable.

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 Northeast New Mexico Detention Facility monthly PREA tracking log, GEO 2014 and 2015 annual PREA report, and the New Mexico Corrections Department 2013, 2014, 2015 Annual PREA reports all of which included Northeast New Mexico Detention Facility data. Northeast New Mexico Detention Facility collects uniform data to be used by GEO and New Mexico Corrections Department.

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 audit team 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 auditor reviewed New Mexico Corrections Department 2013, 2014, 2015 Annual PREA reports. It is a very good in-depth report and the Northeast New Mexico Detention 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)

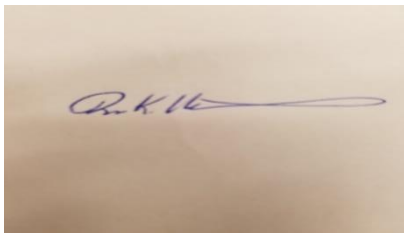
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations 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.



September 27, 2017

Auditor Signature

Date