

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS

NATIONAL  
**PREA**  
RESOURCE  
CENTER



BJA

Bureau of Justice Assistance  
U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]

<b>Name of facility:</b> Arizona State Prison Complex-Phoenix	
<b>Physical address:</b> 2500 E. Van Buren St., Phoenix, Arizona 85008	
<b>Date report submitted:</b> 4 June, 2014 Final Report	
<b>Auditor Information</b> Jack Falconer	
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<b>Email:</b>	
<b>Telephone number:</b>	
<b>Date of facility visit:</b> 27-29 May, 2014	
<b>Facility Information</b>	
<b>Facility mailing address:</b> <i>(if different from above)</i>	
<b>Telephone number:</b>	
<b>The facility is:</b>	<input type="checkbox"/> Military <span style="margin-left: 150px;"><input type="checkbox"/> County</span> <span style="margin-left: 100px;">Federal</span>
	<input type="checkbox"/> Private for profit <span style="margin-left: 150px;"><input type="checkbox"/> Municipal</span> <span style="margin-left: 100px;">x<input type="checkbox"/> State</span>
	<input type="checkbox"/> Private not for profit
<b>Facility Type:</b>	<input type="checkbox"/> Jail <span style="margin-left: 50px;">x Prison</span>
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## AUDIT FINDINGS

### NARRATIVE:

The PREA audit of the Arizona State Prison Complex – Phoenix, was conducted on May 27-29, 2014.

It is the mission of the Arizona Department of Corrections “To serve and protect the people of Arizona by securely incarcerating convicted felons, by providing structured programming designed to support inmate accountability and successful community reintegration, and by providing effective supervision for those offenders conditionally released from prison”.

ASPC Phoenix Complex is a multi-site facility operated by the Arizona State Department of Corrections. Three separate units are included in the Complex. The Alhambra, Flamenco, and Aspen Units are located at 24<sup>th</sup> street and Van Buren in downtown Phoenix. It is on the grounds of the Arizona State Hospital and leased through the Arizona Department of Health Services. The Complex has an average daily population of 646 inmates with ages ranging from 18 to 68 years old.

The description of the facilities is as follows:

#### Alhambra Unit

The Alhambra Unit is mixed custody male facility with capacity of 439 beds consisting of dormitories and cells. The Unit provides for minimum custody general population, maximum custody mental health, and mixed custody intake reception populations.

On the first day of the PREA audit, the Alhambra Unit housed 55 general population inmates, 30 mental health inmates, and 382 intake reception inmates. The average stay for a general population inmate is two years, mental health inmate is one year, and an intake reception inmate is seven days.

The general population inmates are assigned to various jobs to support and maintain the facility including cleaning porter, laundry porter, inmate barber, kitchen worker, sewing machine operator, maintenance, electrician, motor pool, etc. The mental health inmates are housed in licensed mental health area under the care of mental health staff. Treatment programs offered include Co-occurring Disorder, Social Values, Responsible Thinking, Media, Self-control/anger management, etc.

The intake reception inmates are evaluated via substance abuse screening, academic education testing, criminal thinking testing, criminal history review, escape history review, employment and work skill history review, corrections plan review, life planning review, and PREA risk assessment screening. Information gathered in the evaluation process is entered into the Adult Information Management System. The Corrections Plan program is automated to assess information gathered to determine inmate's relative risk to recidivate and the inmate's need level for each program area, resulting in placement in the priority ranking list for program enrollment as per intervention level. Approximately 2028 reception inmates were processed in the past year.

Visitation, medical services, and religious services are made available to inmates. Alhambra has monthly fundraiser benefiting various charities such as Crisis Nursery, Miracle Flights for Kids, etc.

### Flamenco Unit

The Flamenco Unit is a licensed mental health treatment facility with capacity of 125 beds. The Unit is located within the main complex surrounded by combination of 30 foot walls and two perimeter fences with razor wires. The inmates are located in cells.

The Unit houses male close custody general population, male close custody protective custody, female close custody general population, and male maximum custody inmates.

On the first day of PREA audit, Flamenco Unit housed 63 male inmates and 7 female inmates. The average stay for the Flamenco inmates is approximately two years. The Unit is a licensed mental health treatment facility. Treatment programs offered include Responsible Thinking, Self Control, Social Values, Re-entry, Co-occurring Disorders, Managing Symptoms, Women's Self Esteem, Character Development, Substance Abuse Relapse Prevention/Recovery, Relationships, Problem Solving, Life Skills, etc.

Education classes offered included functional literacy and GED. Inmate job assignments include building porter, laundry porter, and floor crew. Programs and services available to inmates included visitation, recreation, education, religious services, medical services, and mental health services.

### Aspen Unit

The Aspen Unit is a medium custody 150 beds male mental health treatment facility surrounded by two perimeter fences with razor wire. Aspen unit has one main building, one education building, one program building, and one Medical building.

Inmate housing is provided in the main building utilizing 3 dormitory style pod areas. Inmates are assigned to various jobs to support and maintain the facility including cleaning porter, laundry porter, inmate barber, kitchen worker, sewing machine operator, maintenance, etc.

Programs offered included Release Planning, Transition, Recreation Therapy, Health Education, Mental Health Education, Process Group, Veterans Processing, Reentry, Cognitive Restructuring, etc. Visitation, medical services, and religious services are made available to inmates. Aspen has a viable vegetable garden with harvested produce donated to the Crisis Nursery Center. The crochet classes also made items for donation to the Crisis Nursery.

Complex Facility ASPC-Phoenix also has an administrative unit that provides spaces for the management of the complex. Included are Complex Administration, Complex Operations and Complex Security. The Complex support provides transportation, Special Security Unit staff, armory, and service dogs to the three Units.

During the three day on-site audit, the auditor toured the facility, examined additional documentation, and conducted formal staff and inmate interviews. 10 inmates from the housing units, 16 specialized staff, 2 management staff, and 10 Correctional Officers were interviewed using the questions provided in the audit documents. The staff and the inmates were eager to answer all questions.

The Pre-Audit document provided by the facility indicated zero allegations of staff sexual abuse and four inmate allegations of inmate sexual abuse. Two of the allegations were unfounded, 1 was unsubstantiated and 1 was still under investigation.

The interviewed inmates and staff indicated that the ASPC-Phoenix facilities were a safe place to serve time and to work. There were no complaints from the inmate population or the facility staff.

In this auditor's opinion, the ASPC-Phoenix was well managed and the staff was well trained and professional in their assignments.

**DESCRIPTION OF FACILITY CHARACTERISTICS:**

**Facility Demographics**

**Arizona State Prison Complex-Phoenix**

Unit	Alhambra	Flamenco	Aspen/SPU	Total
Designed Capacity:	439	125	150	714
Actual Population (5/27/14)	467	70	147	684
Security/Custody level:	medium	mixed	max/close	
Gender	male	male/female	male	
Number of full time staff: (Total complex-shared by each of the Units)				
Administration	6			
Security	284			
Programs	18			
Support	26			
Total Complex (State employees)	334 FTE			
Medical (Contracted service)	106			
Food Service (Contracted service)	6			

**SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded:	0
Number of standards met:	41
Number of standards not met:	0
Number of standards not applicable	2 (115.14, 115.66)
Total	43

**§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)

The Arizona DOC has policies that clearly mandate a zero tolerance for sexual abuse and sexual harassment. The policies also present a plan to address prevention, detection, and responses for all employees. The agency employs a full time PREA Compliance Coordinator and each facility assigns an Assistant Deputy Warden as the PREA Manager. Both have sufficient time to address the needs of PREA.

**§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)

The AZ DOC currently has one contract, developed since August 20, 2012, with a private agency to house prisoners. The contract does require the contractor to comply with all provisions of PREA. A full-time DOC monitor is assigned to the facility under contract.



### **§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)

The AZ DOC has developed a staffing plan to safely meet the PREA and correctional needs. This plan involves collapsing non-custody positions to meet the necessary post staffing requirements at each facility when vacancies occur. The facility reported no deviations from this custody staffing plan for the past 12 months. Unannounced rounds are conducted for all shifts and recorded by senior management staff. A review of the staffing plan was documented.

### **§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)

Not Applicable- No one under 18 years of age at this facility

### **§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)

ASPC-Phoenix has policies that do not permit cross-gender body cavity or strip searches except in emergencies. The policy was confirmed by the staff and inmates interviewed. The facility reported zero instances where these types of searches had occurred. The facility does not permit the cross-gender search of female inmates and zero instances of this occurring were reported. All showers and commode areas have curtains or protective screens. Arizona DOC has a rigid policy where inmates are required to wear shirts and gym shorts or appropriately fastened jumpsuits when out of their cells or cubicles except when showering. No deviations were reported or found. Signs are posted indicating cross-gender staffing would occur at all times.

### **§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)

The facility provides a variety of ways to ensure inmates with disabilities or limited English are provided the opportunity to understand PREA. Orientation videos, pamphlets, booklets, etc. are available. Interpreters are under contract to provide any needed service. Inmate interpreters are prohibited.

### **§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)

The Arizona DOC has a centralized approach for the hiring of new staff. Each facility has an on-site HR manager but the majority of the screening and hiring practices are done at Central Office. The review of agency policy and interviews of both the on-site HR manager and the Central Office Manager verified that they follow the PREA requirements. All contractors are screened by using the same process. A new agency policy requiring the 5 year re-check of employees and contractors has been implemented. Agency policy does indicate any misconduct or false reporting is subject to the possibility of termination of employment.

### **§115.18 – Upgrades to Facilities and Technology**

- 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)

The ASPC-Phoenix has made few modifications to their physical plant during the past year. One modification did occur by adding a strip search room to improve that process. They have also developed and submitted for funding a proposal to add cameras and recording equipment to an area of the facility. These camera additions were approved and they were added.



### **§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)

The Arizona DOC Inspector General Bureau is responsible for conducting all sexual abuse investigations, both administrative and criminal. They are properly trained and meet the requirements of PREA. The facility does not provide forensic medical examinations by DOC staff. They are provided by SAFE and SANE examiners under contract with outside health care providers. The auditor interviewed a representative of the SAFE/SANE provider and verified they were ready to provide services if needed. The facility conducted zero examinations during the last 12 months. Victim advocates are provided by a trained staff person and outside services are available.

### **§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)

The Arizona DOC Inspector General Bureau is responsible for conducting all sexual abuse investigations, both administrative and criminal. The investigators are properly trained and meet the requirements of PREA. During the 12 month period (2013-2014), 4 allegations of sexual abuse and sexual harassment were received. Two allegations were found to be unfounded and a third was found to be unsubstantiated (it is still considered to be under investigation). The fourth complaint was recently received and is under investigation by DOC staff. Agency policy regarding allegations of sexual abuse/harassment investigations is published on [www.azcorrections.gov](http://www.azcorrections.gov).

### **§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)

All ASPC- Phoenix employees, contractors and volunteers, are trained to meet the PREA standards. 286 staff was trained in the past 12 months. The AZ DOC has a comprehensive training program which includes pre-service and annual in-service training and is tailored to meet the gender needs of the facility. The training documentation includes a signature roster that indicates the trainees understand the training presented. The interview process documented that employees understood the materials presented.

### **§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)

149 volunteers and contractors were trained about PREA and correctional requirements during the last 12 months. Signatures documented that they understood the training presented.

### **§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)

In the past 12 months, 2028 ASPC-Phoenix inmates were trained on the principals of PREA. This represented 100% of the reception inmates that were received. All general population inmates assigned to the facility were also trained. Provisions are made to assist those inmates with disabilities or those not proficient in English to ensure their understanding of PREA. Orientation videos, posters, inmate handbooks, etc. are readily available to the inmate population. The inmate interviews indicated that the inmates understood their rights under PREA.

### **§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)

The Arizona DOC Inspector General Bureau is responsible for conducting all sexual abuse investigations, both administrative and criminal. The investigators are properly trained and meet the requirements of PREA.

### **§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)

The Medical and Mental Health services are provided by a private contractor. All staff of the contractor has been trained in the requirements of PREA. Forensic examinations are not conducted by the medical staff. These exams, if needed, are provided by a certified local health care organization. All Health Care/Mental Health staff receives the same PREA training that is provided to the facility staff.

### **§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).

100 % of the inmates received by ASPC-Phoenix are screened for the risk of sexual abuse victimization or sexual abuse towards other inmates. This screening is accomplished within the first 72 hours of arrival. The risk assessment document is a State wide instrument that meets the PREA requirements. The inmate risk level is reassessed if warranted within the time frames required.

### **§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)

The information gleaned in the intake screening process is used to develop a personalized program and facility location for each inmate received. This documentation is used make decisions to safely place each inmate in appropriate housing, work, education, and program assignments.

### **§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)

The AZ DOC/ASPC-Phoenix policies govern the use of segregation housing. These policies include looking at alternatives for victims of sexual abuse. The facility reported zero use of segregation in the past 12 months for the purpose of protecting a sexual abuse victim. Policies require a review every 30 days for any inmate in segregation.

### **§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)

The facility has several ways that an inmate can report sexual abuse/harassment. The inmate can report an incident to any staff person, write a grievance or report, use a special PREA hot line, write letters, or notify a third person. No inmates are held for civil immigration purposes at the facility. Inmate and staff interviews confirm that the process is well understood.

### **§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)

The Arizona DOC has an effective grievance process that meets the PREA requirements. It is a formal process. There were no grievances filed for sexual abuse/harassment in the past 12 months.

### **§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)

The ASPC-Phoenix provides, to the inmates, confidential access to outside victim advocates by providing the name of the organization, toll free telephone number, posters, and the information is in the inmate handbook. The facility has been unable to obtain an MOU for the Phoenix area after repeated attempts. To ensure that the inmates have someone who can assist an inmate to provide advocacy services, the facility has trained one of its staff to provide this service. The employee was trained and certified by the Arizona Coalition to End Sexual and Domestic Violence.

### **§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)

The Arizona DOC has a website ([azcorrections.gov](http://azcorrections.gov)) that provides the opportunity for third party reporting of sexual violence. The website also provides the policies regarding any sexual violence.



### **§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)

ASPC-Phoenix policies require all staff to immediately report any incident of sexual abuse/harassment. The policy also addresses the need to maintain confidentiality. The policies address possible retaliation. Senior management staff has been assigned the task to monitor possible retaliation and the monitoring is recorded.

### **§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)

The facility requires all staff to immediately take steps to protect an inmate who is the subject of imminent sexual abuse. There have been zero incidents of this action being required in the past 12 months.

### **§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)

AZ DOC policy requires the notification of another facility when they learn of an inmate being sexually abused at that other facility. This notification is done within the 72 hour time frame. Documentation is required that the report will be investigated and properly acted upon.

### **§115.64 – Staff First Responder Duties**

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

Agency policy meets all first responder requirements of PREA. This policy was verified by the responses from the staff being questioned. In the past 12 months, 4 allegations from inmates were recorded. These allegations were investigated with the following results: 2 were unfounded; 1 unsubstantiated, and one still under investigation. None of these allegations involved first responders.

### **§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)

A written institutional plan was available for ASPC-Phoenix. The facility has adopted the Arizona Department of Corrections plan for actions taken in response to an incident of sexual abuse. The plan meets the requirements of PREA.

### **§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)

Not applicable. The AZ DOC has a union but State law prevents collective bargaining.

### **§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)

The facility has policies that protect inmates and staff from retaliation who report sexual abuse/harassment. Senior management supervises the plan. The facility reported zero instances of retaliation in the past 12 months.

### **§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)

AZ DOC has policies in place that govern the use of involuntary segregation. These policies do meet the PREA requirements. There have been zero uses of segregation for this purpose in the past 12 months.

### **§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)

The Arizona Department of Corrections has an Inspector General Bureau which is a Division of the Department. All investigations, agency wide, both criminal and administrative, are supervised by staff assigned to this Division. Three investigators have been assigned to the ASPC- Phoenix. These investigators have all been trained to meet the requirements of PREA. The facility reported zero cases of substantiated allegations since 20 August, 2012. Written reports are developed per PREA requirements.

### **§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)

The investigative unit indicates they use as a standard the preponderance of the evidence.

### **§115.73 – Reporting to Inmate**

- 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)

The AZ DOC Inspector General Bureau conducts all investigations. In the past 12 months, 4 allegations from inmates were recorded. These allegations were investigated with the following results: 2 were unfounded; 1 unsubstantiated, and one still under investigation. The inmates who filed an allegation were informed of the results of the investigation. These reports are documented.

### **§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)

The agency has disciplinary sanctions for staff up to and including termination for violating sexual abuse/harassment policies. The facility reported zero cases of staff terminated or resigned for violating policies on sexual abuse/harassment.

### **§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)

The agency has disciplinary sanctions for volunteers and contractors up to and including termination of contract for violating sexual abuse/harassment policies. The facility reported zero cases of volunteers/contractors terminated for violating policies on sexual abuse/harassment.

### **§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)

The AZ DOC has policies providing sanctions for inmates engaged in sexual abuse of another inmate. These sanctions meet the PREA requirements. Consideration is given to the inmate's mental status in final determinations. Treatment is also offered to those found guilty. The agency has a policy that does not permit consensual sex between inmates. The facility reported zero cases of administrative or criminal findings of inmate-on-inmate sexual abuse in the past 12 months.

### **§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)

AZ DOC policy requires that all inmates who disclosed prior sexual victimization during initial screening be offered a follow-up meeting with medical or mental health. The meeting is required within 14 days of the initial screening. The same policy also applies to inmate who perpetrated sexual abuse. The facility reported that 100% of the inmates meetings were met. Information found in the follow-up meeting is strictly limited to medical, mental health, security, and management staff. Informed consent is obtained by the medical staff.

### **§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)

The medical program at ASPC-Phoenix is staffed 24/7. All inmates who report to be sexual abused have unimpeded access to medical treatment. The community standard medical treatment includes proper medical care, treatment for sexual transmitted disease, and at no cost to the inmate.



### **§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)

The facility provides medical and mental health evaluation and treatment consistent with the community standard for health care. These services are provided to all inmates who have been sexually abused. Female inmate victims are provided pregnancy and disease tests. These services are at no cost to the inmate. Inmate abusers are also offered mental health evaluations within a 60 day period.

### **§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)

The facility policy requires that all incidents of sexual abuse are thoroughly reviewed by an incident review team. This team includes the PREA Compliance Manager and several top facility management staff. The reports are then reviewed by the Warden and DOC Administrative staff. The team is required to review and make recommendations within 30 days of the incident. The facility reported 1 sexual abuse incident in the past 12 months.

### **§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)

The DOC collects sexual abuse data from all of its facilities, to include those operated under contract, and compiles the data annually. The process followed meets the requirement of PREA.

**§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)

The AZ DOC collects sexual abuse data from all facilities and aggregates into an annual report. This report is available on the web at [www.azcorrections.gov](http://www.azcorrections.gov). The report is approved by the Director of Arizona Corrections.

**§§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)

The AZ DOC collects and securely retains data for a period exceeding 10 years. This data is compiled from reports of all its facilities plus those under contract. This information is a public document and is readily available to the public.

**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Jack Falconer Jack Falconer  
Auditor Signature

4 June , 2014  
Date