PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL PREA RESOURCE CENTER

Bureau of Justice Assistance
U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]				
Name of facility:	Arizona State Prison Complex- Douglas			
Physical address:	6911 N. BDI Blvd. , Douglas, AZ 85607			
Date report submitted:	5 November, 2014 FINAL REPORT			
Auditor Information	Jack Falconer			
Address:	P.O. Box 72673, Phoenix, AZ 85050			
Email:	jfalconer1@cox.net			
Telephone number:	602-374-3320			
Date of facility visit:	20-22, October, 2014			
Facility Information				
Facility mailing address: *(if different from above)*	ASPC Douglas, PO Box 3867, Douglas, AZ 85608-3867			
Telephone number:				
The facility is:	☐ Military	☐ County	Federal	
	☐ Private for profit	☐ Municipal	x☐ State	
	☐ Private not for profit			
Facility Type:	☐ Jail	**x** Prison		
Name of PREA Compliance Manager:	Douglas Santiago	**Title:** PREA Compliance Manager/CO IV		
Email address: dsantiag@azcorrections.gov		**Telephone number** (520)-364-7521		
Agency Information				
Name of agency:	Arizona Department of Corrections			
Governing authority or parent agency: *(if applicable)*				
Physical address:	1601 W. Jefferson, Phoenix, AZ 85007			

Mailing address: *(if different from above)*			
Telephone number:	602-542-5497		
Agency Chief Executive Officer			
Name:	Charles L. Ryan	**Title:**	Director
Email address:	cryan@azcorrections.gov	**Telephone number:**	602-542-5225
Agency-Wide PREA Coordinator			
Name:	Michael McCarville	**Title:**	PREA Coordinator-AZ Corrections
Email address:	mmccarvi@azcorrections.gov	**Telephone number:**	602-771-5798

AUDIT FINDINGS

NARRATIVE:

The PREA Audit of the Arizona State Prison Complex-Douglas (ASPC-Douglas) was conducted on 20-22 October, 2014.

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

On Monday, October 20, an entrance meeting was held at 1:00 p.m. where introductions were made. The following staff was in attendance

Warden Al Ramos

Deputy Warden Mark Jacobsen (Mohave Unit)

Deputy Warden Robert Langham (Eggers Unit)

Deputy Warden Wayne Wilson (Complex Operations)

Deputy Warden Carol Frisbee (Papago Unit)

Associate Deputy Warden Render Gregory (Gila Unit)

Correctional Major Matthew Williams (Complex Security)

Captain Dana McCrory (Complex Operations)

Captain Julio Carrasco (Papago Unit)

Captain Karla Huereña (Complex Operations)

Captain Paul Martell (Mohave Unit)

Captain Ed Strasshofer (Gila Unit)

COIV Douglas Santiago (PREA Compliance Manager)

Correctional Officer IV Victor Gomez (Gila Unit)

Correctional Officer IV Bob Sigona (Mohave Unit)

Correctional Officer IV Derek Alvarez (Gila Unit)

Correctional Officer IV Francisco Vasquez (Mohave Unit)

PREA Coordinator Michael McCarville (Arizona Department of Corrections)

After the entrance meeting, a tour of the Gila Unit and interviews for staff and inmates was conducted. During the tour, inmate housing, program areas, food service, medical, recreation,and other areas required by the PREA guidance were examined. On Tuesday and Wednesday, the Mohave, Papago, Eggers and the Complex Detention units of the ASPC were toured and interviews were conducted.

The Arizona State Prison Complex-Douglas is a multi-site facility operated by the Arizona Department of Corrections (ADC). Four individual correctional units are part of this complex (see below). The complex has a capacity of housing 2431 inmates and currently has a population of 2347 male inmates on its minimum, medium and maximum custody units ranging from age 18 to 83.

ASPC-Douglas is situated along U.S. Highway 191 approximately 10 miles north of the City of Douglas, Arizona. The ASPC is located on a 2700 acre site which includes the adjacent Bisbee/Douglas International Airport. Groundbreaking for the facility occurred in 1983 with construction completed in 1986. In 1983 the Papago Unit, became the first unit to be activated at the Arizona State Prison Complex in Douglas. The Papago Unit is located on Arizona State Highway 80 approximately 10 miles south of the main facility and lies within the city limits of Douglas, Arizona. In 1984, the Mohave Unit (North & South) & Gila Unit were activated. In 2004, the Eggers Unit was constructed as an expansion unit on the main complex and was activated in 2005 as a minimum custody facility. In 2005, the ASPC-Douglas became a 2561 male inmate facility which included 835 minimum custody beds (Gila Unit), 240 minimum custody beds(Eggers Unit), 340 minimum custody beds (Papago Unit), 130 minimum custody beds (Maricopa Unit), 927 medium custody beds (Mohave Unit) and 89 maximum custody beds at the Complex Detention Unit

Papago Unit

The unit houses minimum custody male inmates with a capacity of 340. There are 85 rooms housing 4 inmates in each room. The inmates are assigned to various jobs assignment that include porters, sanitation, inmate barbers, education aides, tutors, kitchen detail, yard sanitation, landscaping, maintenance and clerical. There are also a select number of inmates who work out in the community on Inter Government Agreement work details. Programming for the unit consists of Academic Education, Self-Improvement Programs, i.e., Thinking for a Change (a cognitive behavior program), and Merging Two Worlds (aimed at preparing inmates for re-entry into society after an incarceration period). Inmate Orientation is offered to all newly arrived inmates which provides an explanation of services available and what expectations are

are placed on them while housed at this facility. The Papago inmates have the opportunity to participate in AA and various religious activities sponsored and supervised by religious volunteers. On the first day of the PREA audit, the population of the Papago Unit was 326 inmates.

Eggers Unit

The unit has a capacity for 240 minimum custody inmates. The unit has two dormitory bays housing 120 inmates in each bay. The inmates are assigned to various job assignments on both the unit and on complex grounds including porters, landscapers, kitchen workers, sanitation workers, fleet services technicians, sewing factory technicians, kennel & stable care, information technology technicians, heavy equipment operators, firefighters, construction, and facility maintenance technicians. Available programming for inmates includes Thinking for a Change and Merging Two Worlds. Career Technical Education courses are also offered by the nearby Cochise Community College. Inmate Unit Orientation is offered to all inmates. Inmates assigned to Eggers Unit also have the opportunity to participate in AA and various religious activities. On the first day of the PREA audit, the population of the Eggers Unit was 239 inmates.

Complex Detention Unit (CDU)

The CDU is the main detention unit in the complex with a capacity of 89 inmates in a cell environment. The inmates housed in the detention facility are there for a temporary period of time. On the first day of the PREA audit, there were a total of 84 inmates assigned.

Gila Unit.

The unit has a capacity of 835 minimum custody male inmates. The unit consists of 8 manufactured housing buildings with 79 individual rooms each. Building 12 has a capacity of 87 beds, building 26, 86 beds and building 15, 30 beds. The inmates participate in work details including porters, landscapers, kitchen workers, sanitation workers, fleet services technicians, firefighters, construction, and facility maintenance technicians. Available programming for inmates at this unit includes Thinking for a Change and Merging Two Worlds. Career Technical Education courses offered by the nearby Cochise Community College. Inmate Unit Orientation is offered to all inmates and they also have the opportunity to participate in AA and various religious activities. On the first day of the PREA audit, the population of the Gila Unit was 787.

Mohave Unit

The unit has a capacity of 927 medium custody inmates. Eight individual housing units house an average of 115 inmates each. The inmates are assigned to various job assignments that include porters, landscapers, kitchen workers, sanitation workers, firefighters, construction, and facility

maintenance technicians. Available programming for inmates at this unit includes Thinking for a Change and Merging Two Worlds. Inmate Unit Orientation is offered to all inmates and they are also provided the opportunity to participate in AA and various religious activities. On the first day of the PREA audit, the population of the Mohave Unit was 911.

Facility comments

Each dorm unit provides basic furnishings, shower facilities, and TV. All showers and commodes have panels, shower curtains and screens to enhance privacy. The cell units have lavatory/commodes in the cell, the showers have privacy screens or doors and the detention cells have attached recreation spaces.

The Correctional Officers provide security supervision. The security perimeter consists of woven wire fences with multiple rolls of razor ribbon wire and an electronic intrusion system. Each individual unit also has its own security perimeter of a similar nature. Armed vehicle patrols the perimeter 24/7. A Control Center monitors all traffic entering and exiting the facility. Numerous cameras control the perimeter and are placed throughout the facility to monitor the security. The facilities have two entry points, the front staff and visitor entrance and a wire gate for vehicles.

The ancillary support structures provide spaces for administration, central control, visiting, food service, education, medical, commissary, maintenance, laundry, recreation, and religion.

During the two and one-half day on-site audit, the auditor toured the complex, examined additional documentation, and conducted formal staff and inmate interviews. 14 Inmates, 11 Specialized Staff, 5 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 eight allegations of inmate sexual abuse. All were investigated. Seven cases were determined to be either unfounded, unsubstantiated, or closed due a DA decision not to prosecute and 1 case is still under investigation.

The interviewed inmates and staff indicated that ASPC-Douglas was a safe place to serve time and to work. There were few complaints from the inmate population or the facility staff.

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

On Wednesday morning, an exit meeting was conducted by the auditor. The following ASPC staff was in attendance;
Warden Al Ramos
Deputy Warden Mark Jacobsen (Mohave Unit)
Deputy Warden Robert Langham (Eggers Unit)
Deputy Warden Wayne Wilson (Complex Operations)
Deputy Warden Carol Frisbee (Papago Unit)
Mike McCarville, AZ DOC Administrator / PREA Coordinator
Douglas Santiago, Correctional Officer IV from Douglas Unit

The auditor provided the staff an overview of the audit results and congratulated the facility staff about the progress made in compliance with the PREA standards.

Facility Demographics

	ASPC-Douglas	Mohave/CDU	Gila	Eggers	Papago
Capacity:	2431	927/89	835	240	340
Actual Pop:	2347	911/84	787	239	326
Security/Custody:		Med/Max	Min	Min	Min
Gender:	Male				
Age Range:	18-83				

Full Time Staff

Administration:		9
Criminal Investigations Unit:		6
Arizona Correctional Industries:		5
Security:		499
Programs:		37
Support:		45
Medical:	(Contract)	37
Trinity Food: Service	(Contract)	32
Substance Abuse:		2
Human Resources:		2
Education:		13
Religion:		2
Cochise College:	(Contract)	11
Keefe:	(Contract)	9
Total Facility:		709

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)

X☐ 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 Douglas and the Arizona DOC have policies that mandate a zero tolerance for sexual abuse and sexual harassment of their inmate population. The policies also present a plan to address prevention, detection, and responses for all employees. The AZ DOC employs a full time PREA Compliance Coordinator and the facility assigns a COIV 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)

x☐ 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

X☐ 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 and ASPC-Douglas has developed a staffing plan to safely meet the PREA and correctional needs. This plan involves either using comp/overtime, or 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. Vacancy rates for the ASPC were as follows: 1.55 % for FY 2012, 6.33% for FY 2013, and 5.66% for 2014 (Year to date).

§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)

Standard is not applicable. ASPC Douglas does not house youthful offenders.

§115.15 – Limits to Cross-Gender Viewing and Searches

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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-Douglas 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. 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 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)

x☐ 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 Douglas provides a variety of ways to ensure offenders 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)

x☐ 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 is 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. An 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)

x☐ 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-Douglas has made several modifications to their physical plant during the past year. These include several rest room re-construction projects, the addition of windows to eliminate blind spots, and the construction of a new dog kennel.

They have also developed and submitted for funding a proposal to add cameras and recording equipment to areas of the facility. These camera additions were approved and are in the process of being installed.

§115.21 – Evidence Protocol and Forensic Medical Examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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. ASPC Douglas has three investigators assigned to the Complex. The facility does not provide forensic medical examinations by medical staff. These 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 and outside services are available.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 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), 8 allegations of sexual abuse and sexual harassment were received. All were referred for criminal investigations and all were completed. Four of the cases were determined to be unfounded or unsubstantiated, one case the employee resigned, two cases were substantiated but the County Attorney would not take the case, and one case is from 2010 and still under investigation

Agency policy regarding allegations of sexual abuse/harassment is published on www.azcorrections.gov.

§115.31 – Employee Training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X☐ 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 Douglas employees, contractors and volunteers are trained to meet the PREA standards. 486 staff (100%) was trained in the past 12 months. The Complex 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)

x☐ 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 47 volunteers and contactors for the Douglas Complex 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)

x☐ 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, 3715 ASPC Douglas inmates were trained on the principals of PREA. This represented 100% of both the inmates in the facility prior to August 12, 2012 and those inmates that were received since August 12, 2012. 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 population. The inmate interviews indicated that they understood their rights under PREA.

§115.34 – Specialized Training: Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 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. ASPC Douglas has three investigators assigned to the Complex.

§115.35 – Specialized training: Medical and mental health care

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 of the ASPC Douglas Medical and Mental Health services staff have been trained in the requirements of PREA. The Pre-Audit document indicated that 37 (100%) medical and mental health staff received the PREA training required by DOC policy. Forensic examinations are not conducted by the medical staff. These exams, if needed, are provided by a certified local health care organization.

§115.41 – Screening for Risk of Victimization and Abusiveness

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 3475 inmates received by the Douglas Complex (72 hour or more length of stay) were 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 an instrument that meets the PREA requirements. All inmates are reassessed to look for any updates within the time frames required. The facility reported 2409 inmates were reassessed in the past 12 months.

§115.42 – Use of Screening Information

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 gathered in the inmate screening process at the Douglas Complex is used to make individualized determination to ensure their safety. This documentation is also used to make decisions to place each inmate in appropriate housing, work, education, and program assignments.

§115.43 – Protective Custody

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 AZDOC policies govern the use of segregation housing. These policies include looking at alternative housing and programming 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)

x☐ 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-Douglas has several ways that an inmate can report sexual abuse/harassment. They 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)

x☐ 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 Douglas Complex has an inmate grievance process that meets the requirements of PREA. The process allows the inmate to file a formal written complaint/grievance about sexual abuse or any correctional issue. The complaint can be filed with any staff and will be directed to the Warden for response if necessary. The Offender Handbook clearly outlines the process required. In the past 12 months, there have been zero complaints or grievances filed concerning sexual abuse or harassment.

§115.53 – Inmate Access to Outside Confidential Support Services

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 Douglas Complex 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. Agreements and an MOU are available. To ensure that the inmates have someone who can assist them to provide advocacy services, the facility has two of its staff trained to provide this service.

§115.54 – Third-Party Reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 Correction has a website (azcorrections.gov) that provides the opportunity for third party reporting of sexual violence. The website also provides the reporting policies regarding any sexual violence.

§115.61 – Staff and Agency Reporting Duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 AZDOC and ASPC Douglas policies require all staff to immediately report any incident of sexual abuse/harassment. The policy also addresses the need to maintain confidentially. 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)

x☐ 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 AZDOC policies require all staff to immediately take steps to protect an offender 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)

x☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

AZDOC policy requires the notification of another facility when they learn of an inmate that had been 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. In the past 12 months, the facility reported 1 allegations of sexual abuse that an inmate received at another facility. The actions taken were according to PREA requirements.

§115.64 – Staff First Responder Duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 and the facility policy meet all first responder requirements of PREA. This policy was verified by the responses from the staff being questioned. In the past 12 months, 8 allegations from inmates were recorded. In zero cases, staff were required to separate the victim and the abuser.

§115.65 – Coordinated Response

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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-Douglas. 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)

x☐ 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 who report sexual abuse/harassment from retaliation. 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)

x☐ 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 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)

x☐ 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- Douglas. These investigators have all been trained to meet the requirements of PREA. The facility reported two substantiated allegations since 20 August, 2012 that was referred for prosecution.

§115.72 – Evidentiary Standard for Administrative Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 AZDOC 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)

x☐ 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. The facility reported 8 allegations since 20 August, 2012. 7 have been completed and 1 is still under investigation. All of the inmates were properly informed of the outcome. The facility also reported that there were zero cases of substantiated inmate on inmate sexual abuse cases that were submitted for prosecution. These reports are documented.

§115.76 – Disciplinary sanctions for staff

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 Complex has disciplinary sanctions for staff up to and including termination for violating sexual abuse/harassment policies. The facility reported one case of staff terminated for violating policies on sexual abuse/harassment.

§115.77 – Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 Douglas 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)

x☐ 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 Douglas has policies providing sanctions for inmates engaged in sexual abuse of another inmate. These sanctions meet the PREA requirements. Consideration is given to the inmates' 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)

x☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action

AZDOC 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 inmates who perpetrated sexual abuse. The facility reported that 100% of the offender meetings with mental health 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)

x☐ 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 Douglas 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 offender.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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. These services are at no cost. 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)

x☐ 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 AZDOC Administrative staff. The team is required to review and make recommendations within 30 days of the incident. The facility reported 3 sexual abuse incidents in the past 12 months.

§115.87 – Data Collection

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

AZDOC collects sexual abuse data from all of its facilities 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)

x☐ 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 of its facilities, to include those operated under contract, and compiles the data annually. The process followed meets the requirement of PREA.

§§115.89 – Data Storage, □ Publication, and Destruction □

☐ Exceeds Standard (substantially exceeds requirement of standard)

x☐ 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 Final Report 5 November, 2014

Auditor Signature Date