

**PREA AUDIT REPORT    INTERIM    FINAL**  
**JUVENILE FACILITIES**

**Date of report:** July 12, 2016

<b>Auditor Information</b>			
<b>Auditor name:</b> William Benjamin			
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<b>Telephone number:</b> 518-466-5319			
<b>Date of facility visit:</b> June 8 – 10, 2016			
<b>Facility Information</b>			
<b>Facility name:</b> Canyon State Academy			
<b>Facility physical address:</b> 20061 East Rittenhouse Road, Queen Creek, AZ 85142			
<b>Facility mailing address:</b> <i>(if different from above)</i> Same			
<b>Facility telephone number:</b> 817-579-0852			
<b>The facility is:</b>	<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		
<b>Facility type:</b>	<input type="checkbox"/> Correctional	<input type="checkbox"/> Detention	<input checked="" type="checkbox"/> Other
<b>Name of facility's Chief Executive Officer:</b> Stephen Parker - Program Director			
<b>Number of staff assigned to the facility in the last 12 months:</b> 291			
<b>Designed facility capacity:</b> 96			
<b>Current population of facility:</b> 88			
<b>Facility security levels/inmate custody levels:</b> Licensed Group Home/Adjudicated Placement/Dependent Neglect			
<b>Age range of the population:</b> 11 -19 years old			
<b>Name of PREA Compliance Manager:</b> Steven Beard		<b>Title:</b> Site PREA Compliance Manager	
<b>Email address:</b> Steven.Beard@rop.com		<b>Telephone number:</b> 817-579-0852	
<b>Agency Information</b>			
<b>Name of agency:</b> Rite of Passage, Inc			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> N/A			
<b>Physical address:</b> 2560 Business Parkway, Suite A, Minden, NV 89423			
<b>Mailing address:</b> <i>(if different from above)</i> Same			
<b>Telephone number:</b> 775-267-9411			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> J. Ski Browman		<b>Title:</b> Chief Executive Director	
<b>Email address:</b> S.Browman@rop.com		<b>Telephone number:</b> 775-267-9411	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Heather Howell		<b>Title:</b> Regional Improvement PREA Coordinator	
<b>Email address:</b> heather.howell@rop.com		<b>Telephone number:</b> 775-720-6717	

## AUDIT FINDINGS

### NARRATIVE

Rite of Passage, Inc. (ROP) contracted with William Benjamin, DOJ certified PREA Auditor from Benjamin Correctional Consulting, LLC, to conduct a PREA compliance audit of the Canyon State Academy, located in Queen Creek, Arizona. The scope of the audit was limited to the Adjudicated Placement Program (the Juvenile Justice Program) portion of the facility and all areas accessed by those residents. The Canyon State Academy's audit notification was posted in all common areas and living areas on April 9, 2016.

Mr. Benjamin, after receiving and reviewing the pre-audit questionnaire and other facility documents on May 27, 2016, conducted the onsite PREA compliance audit from June 8 - 10, 2016. An entrance interview was conducted on June 8, 2016 with Program Director Stephen Parker, Assistant Director Marshall Zinn, Clinic Supervisor Phil McDonald, Assistant Principal Louis Reusing, Director of Group Living Dan Lomas, Director of Student Services Dana Bennett, Regional Improvement PREA Coordinator Heather Howell, PREA Compliance Manager Steven Beard, Case Manager Jared Arthur, and Human Resource Director Tracey Bentley.

The onsite PREA compliance audit included a complete three (3) hour facility tour of all areas of the facility and formal interviews with Executive Director Brian Heath, Program Director Stephen Parker, Clinic Supervisor Phil McDonald, Director of Group Living Dan Lomas, Director of Student Services Dana Bennett, Regional Improvement PREA Coordinator Heather Howell, PREA Compliance Manager Steven Beard, Case Manager Jared Arthur, Human Resource Director Tracey Bentley, and six (6) other randomly selected Canyon State Academy staff. Throughout the audit, informal interviews of both residents and staff were conducted to verify facility compliance with the PREA standards. A complete and thorough review of all supporting documents, agency and facility Policies and Procedures, residents' case files, and other related supporting documentation was conducted with the Regional Improvement PREA Coordinator and the PREA Compliance Manager. Daily out briefs were conducted with the Program Director, the Regional Improvement PREA Coordinator, and the PREA Compliance Manager.

A total of ten (10) male residents were interviewed, with ages ranging from 14 to 17 years old. The auditor selected all of the residents at random from various living units and status levels from a facility student list. At the time of the audit, there were no current residents that had made an allegation of sexual harassment within the past year. All residents interviewed had extensive knowledge of their right to be free from sexual abuse and sexual harassment. All residents were aware of the state's abuse hotline and the facility's procedures for reporting abuse, although none had ever needed to use it. All residents acknowledged they were screened upon admission and received basic PREA information which includes the facility's "Zero Tolerance" policy on engaging in sexual abuse or sexual harassment. Within seven (7) days of admission, residents are provided more comprehensive PREA education which includes a video explaining their right to be free from sexual abuse and sexual harassment. All residents knew the multiple ways to report abuse and felt very confident that any report they made would be properly addressed by the facility's administration. There were two (2) substantiated sexual misconduct allegations in the past twelve (12) months made by former residents.

A formal exit interview was conducted on June 10, 2016 with Executive Director Brian Heath, Program Director Stephen Parker, Assistant Director Marshall Zinn, Clinic Supervisor Phil McDonald, Assistant Principal Louis Reusing, Director of Group Living Dan Lomas, Director of Student Services Dana Bennett, Regional Improvement PREA Coordinator Heather Howell, PREA Compliance Manager Steven Beard, Shift Supervisor James Stallup, Unit Manager Derick Jameson, and Human Resource Director Tracey Bentley.

All staff displayed a high level of professionalism, knowledge of the PREA requirements, and knowledge of their roles in the PREA process. All residents interviewed, both formal and informal, were found to be well aware of their rights granted by the PREA laws. Residents stated that they felt safe at Canyon State Academy and they believed that staff cared about their well-being and safety.

## DESCRIPTION OF FACILITY CHARACTERISTICS

Canyon State Academy is open campus style, modeled after a high school campus, with dorm style living units. The Residential Treatment Center Program being audited has two (2) dorm buildings, with a total capacity of 96 adjudicated placement juvenile male residents (students), ages 11-19 years old. Currently, 88 students reside in the two (2) Student Cottage dorms, Superstition and San Tan (44 students in each). Each dorm living unit has two (2) wings, with six (6) bedrooms housing four (4) students each in bunk bed style accommodations. Each wing has a secure group bathroom with individual showers, urinals, and toilet stalls. Each living unit has a "control bubble" in the center which can view both wings. Each dorm's Case Manager and Unit Manager have offices that open into the control bubble.

The following living units are also on campus, but are not part of the Adjudicated Placement Juvenile Justice Program being audited: Eight (8) Academy Cottages (which house social services students), five (5) Assessment and Stabilization Center Cottages (which house shelter social services temporary placements), and two (2) Independent Living Cottages (which house transitional students).

The campus has seven (7) student accessible buildings as follows: Administration, Kitchen/Dining Room, Academic (School Classrooms/Theater and Library), Vocation (Welding/Auto Shop), Barber Shop Vocation, Sports Complex (Gym/Weight Room), and Refocus.

Rite of Passage, Inc. (ROP) has owned and operated Canyon State Academy since March, 2000, providing residential services to male adolescents. Canyon State Academy's staff work with a diverse population of youths ranging from 11-19 years of age. Strengths-based services are provided in a normalized academic environment, enabling students to gain skills to enhance their opportunities for success. Features of Canyon State Academy's Program includes: Strengths-based approach with many educational, vocational, athletic, and community service opportunities; highly trained, experienced staff to guide at-risk students; Cognitive behavioral curricula including Aggression Replacement Training (ART) and Thinking for a Change (T4C); and an Accredited Voucher School Facility.

The population at the time of the audit was 88 residents and the average length of stay is eight (8) months. ROP and Canyon State Academy refer to their residents as "students" and "students/athletes".

Therapeutic and Case Management Services assigns each student a Masters level therapist who provides individual counseling in a prescriptive treatment plan and provides comprehensive case management services. All students participate in core groups and have the option to attend specialized groups based on individual needs. Each student also has access to psychiatric services and treatment by a licensed medical practitioner.

Canyon State Academy's recreation program is designed to improve physical fitness and promote healthy, positive lifestyle choices. The students may participate in intramural sports, art, music, board games, and other leisure activities that teach them to use their time positively and productively. Students are also given the opportunity to participate in many off-site activities. Community resources and assets are accessed to help students discard delinquent and anti-social behavior and embrace pro-social behavior. Using this approach, Canyon State Academy strives to rebuild the relationships students have with their community by connecting them to resources and providing community service opportunities. Family visitations and treatment services are responsive to the unique needs of all students and their families.

## **SUMMARY OF AUDIT FINDINGS**

On June 8 - 10, 2016, a three (3) day PREA compliance audit was completed at Canyon State Academy located in Queen Creek, Arizona. The results indicate:

Number of standards exceeded: 1

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 2

**Standard 115.311 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.**

Canyon State Academy and Rite of Passage’s (ROP) Safe Environment Standards policy mandates Zero Tolerance against all forms of sexual abuse and sexual harassment. Rite of Passage prohibits all sexual activity between or with any student(s) under their care and supervision. No staff may work at an ROP program before completing PREA training. The policy indicates how it implements the zero tolerance approach to preventing, detecting, and responding to sexual abuse and harassment. The policy also contains definitions of sexual abuse and sexual harassment and identifies sanctions for participating in prohibited behaviors.

ROP has a full time PREA Coordinator, whose title is Regional Improvement PREA Coordinator, who oversees Canyon State Academy’s PREA activity. Canyon State Academy Services has an onsite PREA Compliance Manager, working under the title PREA Compliance Manager, who manages the facility’s PREA program and functions. The Regional Improvement PREA Coordinator and the PREA Compliance Manager were both interviewed and stated that they have sufficient time and authority to coordinate the facility’s efforts to comply with PREA standards.

Interviews with Canyon State Academy’s staff and residents support the facility-wide understanding of the zero tolerance policy against all forms of sexual abuse and sexual harassment.

**Standard 115.312 Contracting with other entities for the confinement of residents**

- 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)

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Not Applicable – ROP/Canyon State Academy does not contract with other facilities for the confinement of residents.

**Standard 115.313 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)

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Canyon State Academy’s staffing plan was reviewed by the Auditor. The facility has not deviated from its staffing plan in the past 12 months. Canyon State Academy maintains a minimum 1:10 staff-to-resident ratio during waking hours and a minimum 1:24 staff-to-resident ratio during sleeping hours, both of which will not meet the minimum PREA staff ratio standard that will go into effect on October 1, 2017.

Supervisory staff conduct and document unannounced rounds on all shifts. Such rounds are recorded on a shift supervisor unannounced form and are maintained by the PREA Compliance Manager. Interviews of shift supervisors and management confirmed this practice.

The Auditor noted that corrective action was required in several areas to improve resident supervision and to eliminate blind spots. At the time of this final report submission, all corrective actions have been verified as completed. Specifically:

1. The School’s bathroom mirror that could view urinals from the walkway needed to be removed or covered permanently. The facility immediately affixed a cover over the mirror prior to the Auditor’s exit interview. Since then the mirror has been permanently removed as verified by photos submitted by the PREA Compliance Manager.
2. The urinals in the Gym’s home locker room needed two partitions to provide privacy. The facility immediately secured the urinals for single person use by signage and staff control. Partitions were subsequently ordered and have been installed as verified by photos submitted by the PREA Compliance Manager.
3. The bookshelves in the Library were in zigzag orientation, creating blind spots for residents. The facility immediately corrected this by straightening the bookshelves as verified by the Auditor while still on site.
4. The Facility’s Library and School’s common area lacked resident PREA information posters. The facility immediately corrected this by mounting PREA posters in the Library and in the central core of the School complex as verified by the Auditor while still on site.
5. Both Student Cottage dorm bathrooms had poor illumination and required improved lighting. The facility procured and has installed new lighting fixtures in all four (4) Student Cottage dorm bathrooms as verified by photos submitted by the PREA Compliance Manager.
6. The bathroom entrance doors in both Student Cottage dorms had automatic door closures, requiring staff to hold the doors open while supervising the group bathroom and shower times. This limited staff’s ability to supervise residents and intervene as needed without being shut in the bathroom area. Door stops were required to allow the bathroom entrance doors to be blocked open and allowing staff free to move about as needed. The facility procured and installed door stops on all four (4) bathroom doors in the Student Cottage dorms as verified by Auditor while still on site.
7. All Student Cottage dorm exterior bedroom windows needed to be covered for privacy at night. The windows are tinted but at night the interior lights allow a clear view of the bedrooms from outside the building. The facility procured and installed new curtains on each window with Velcro attachments as verified by Auditor while still on site.
8. When closed, the bleachers in the Gym had open end caps where residents could hide. The facility has installed end cap covers on all of the open ends of the bleachers in the Gym as verified by photos submitted by the PREA Compliance Manager.

**Standard 115.315 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.**

Compliance with this standard was determined by the following:

Canyon State Academy’s policy prohibits cross gender searches of residents by staff. Resident interviews confirmed there were no pat-down searches by staff of different gender.

Staff and resident interviews indicated that residents shower in individual shower stalls, completely change their clothes in the bathroom or shower stalls, and use the bathroom without being viewed by staff.

### **Standard 115.316 Residents with disabilities and residents 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.**

Canyon State Academy’s policy states residents are not to be used as interpreters for other residents. The facility has PREA literature in both English and Spanish and, as needed, access to language interpreters from resources outside the facility. Residents with disabilities (e.g., residents who are deaf or have difficulty hearing; those who are blind or have low vision; or those who have intellectual, psychiatric, or speech disabilities) have equal opportunity to participate in or benefit from all aspects of ROP/Canyon State Academy’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

### **Standard 115.317 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.**

ROP policy requires Canyon State Academy to conduct a criminal background record check before a new staff person who may have contact with residents is hired, consult any child abuse registry maintained by the State or locality in which the staff would work, and check the State’s sexual abuse registry. Canyon State Academy conducts the same

complete background checks for volunteers and contractors.

A review of Canyon State Academy's personnel files revealed that all employees, contractors, and volunteers who have contact with their residents have had complete background checks within the past five (5) years. It should be noted that all employees who work with residents are required by the state of Arizona to have a Level One Fingerprint Clearance Card issued by the Arizona Department of Public Safety. Each employee's personnel file included a copy of their Level One Fingerprint Clearance Card, issued within the past five (5) years. Such background check cards have a six (6) year expiration, but to comply with the PREA standards, Canyon State Academy reapplies for a new Level One Fingerprint Clearance Card for all employees at five (5) years intervals.

ROP also requires all applicants and employees who may have contact with residents, a continuing affirmative duty to disclose any misconduct during their employment with ROP. By policy, Canyon State Academy will provide information on substantiated allegations of sexual misconduct or abuse involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

### **Standard 115.318 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.**

Not Applicable – ROP has operated Canyon State Academy since 2000 and has not made any substantial expansion to the existing facilities nor has ROP updated or installed a video monitoring system since August 20, 2012, making this standard not applicable.

ROP policy is that when designing or acquiring any new program or planning any substantial expansion or modification of existing facilities, the CEO, the Regional Executive Director, and the Director of Program Operations will consider and document the effect of the design, acquisition, expansion, or modification upon the organization's ability to protect residents from sexual abuse. ROP's Director of Program Operations will formulate the documentation mentioned above.

When installing or updating a video monitoring system, the electronic surveillance system, or other monitoring technology, the CEO, the Regional Executive Director, the Director of Program Operations, the Program Director/ Manager, and the Corporate IT Director will consider and document how such technology may enhance the organization's ability to protect residents from sexual abuse. ROP's Director of Program Operations will formulate the documentation of this review.

### **Standard 115.321 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.**

Canyon State Academy conducts administrative investigations for alleged sexual abuse and misconduct. The Maricopa County Sheriff’s Department conducts criminal investigations for both. All resident victims of sexual abuse have access to offsite forensic medical examinations at no cost. Sexual Assault Forensic Examiners (SAFE) and Sexual Assault Nurse Examiners (SANE) personnel services are available at Mercy Gilbert Hospital. The Canyon State Academy’s Program Director will refer victims of sexual abuse to an agency that follows evidence protocols for forensic medical examinations.

Canyon State Academy has a verbal agreement and documented attempts to enter into an MOU with both the Maricopa County Sheriff’s and Mercy Gilbert Hospital for SAFE/SANE medical examination services.

### **Standard 115.322 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.**

Allegations of sexual abuse or sexual harassment at Canyon State Academy are referred for criminal investigation to the Maricopa County Sheriff’s Department, which has the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The determination of whether an allegation involves potentially criminal behavior is made by ROP’s Program Director and Corporate Director of Human Resources.

Canyon State Academy has documented attempts to enter into an MOU with the Maricopa County Sheriff’s Department for criminal investigations of sexual assault and abuse allegations. The Sheriff’s Department had responded to the MOU request stating that they would conduct criminal investigations into sexual misconduct and abuse as required.

The Canyon State Academy’s website includes its investigative responsibilities and contact information for the Maricopa County Sheriff’s Department. During the audit, the Maricopa County Sheriff’s Department reporting number was tested and found to be acceptable by the Auditor.

### **Standard 115.331 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.**

ROP/Canyon State Academy provides the following appropriate training to all staff (full time, part time, and contracted mental health care practitioners) at pre-service and every six months thereafter from the last onsite training:

1. ROP zero-tolerance policy for sexual abuse and sexual harassment;
2. How to fulfill their responsibilities of sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
3. Residents' right to be free from sexual abuse and sexual harassment;
4. The right of residents and staff to be free from retaliation for reporting sexual abuse and sexual harassment;
5. The dynamics of sexual abuse and sexual harassment in juvenile facilities;
6. The common reactions of juvenile victims of sexual abuse and sexual harassment;
7. How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents;
8. How to avoid inappropriate relationships with residents;
9. How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;
11. Relevant laws regarding the applicable age of consent; and
12. There is no age of consent for juveniles in confinement.

The training is tailored to the unique needs and attributes of residents in the programs and to their gender.

ROP/Canyon State Academy provides each staff with refresher training every six months to ensure that all staff know its current sexual abuse and sexual harassment policies and procedures.

The facility documents the training through attendance sheets and a form which includes staff signature or electronic verification that staff understands the training they have received. The documentation is kept in the employee's file.

The Auditor's review of staff training records and staff interviews confirmed the Program Director and all employees/contractors have received PREA training.

ROP/Canyon State Academy exceeds the PREA standard by providing PREA refresher training to all staff every six (6) months.

#### **Standard 115.332 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.**

Compliance with this standard was determined by the following:

Canyon State Academy’s policy and the training curriculum indicate volunteers and contractors are trained annually on all required training topics.

Auditor review of staff training records and staff interviews confirmed all volunteers and contractors received PREA training within the past 12 months.

Employee training records were reviewed by the Auditor and knowledge and understanding of the training content was confirmed during staff interviews.

### **Standard 115.333 Resident 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)

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Compliance with this standard was determined by the following:

During the intake process, Canyon State Academy’s residents receive the ROP Safe Environment Standards brochure “A Student Guide to Rights, Protections, and Reporting of Sexual Abuse” that explains the program’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The residents also receive and sign ROP’s Safe Environment Standards form “Student Acknowledgment of Zero Tolerance”. The signed acknowledgment forms are maintained in the resident’s Case Management file.

Within five (5) days of intake, residents receive an Orientation Program which provides comprehensive age-appropriate education to residents regarding their right to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting such incidents, and ROP/Canyon State Academy’s policies and procedures for reporting such incidents.

ROP/Canyon State Academy provides residents with education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as residents who have limited reading skills. ROP/Canyon State Academy maintains documentation of resident participation in these educational sessions in the resident’s Case Management file.

In addition to providing such education, the program ensures that key information is continuously and readily available or visible to residents through posters, the Student Handbook, or other written formats. However, the Auditor noted that the facility’s Library and School’s common area lacked resident PREA information posters and made recommendations that PREA education posters be placed in the Library and next to the School’s bathroom area. Both of these recommendations were immediately addressed while the Auditor was on site.

ROP has developed an outstanding PREA educational video that is played during the Canyon State Academy’s Orientation Program.

### Standard 115.334 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)

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Compliance with this standard was determined by the following:

- (a) In addition to the general training provided to all employees pursuant to *PREA Standard 115.331*, ROP ensures that, to the extent the agency itself conducts sexual abuse administrative investigations, its investigators have received training for conducting such investigations in confinement settings.
- (b) Authorized investigators for ROP include the Program Director (or designee) and the Human Resource Managers/Directors.
- (c) Specialized training includes techniques for interviewing juvenile sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence preservation, and gathering the criteria and evidence required to substantiate a case for administrative action or law enforcement referral.
- (d) ROP Human Resources and/or the Site Trainer maintain documentation that ROP/Canyon State Academy's investigators have completed the required specialized training for conducting sexual abuse administrative investigations.

### Standard 115.335 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)

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All full-time and part-time medical and mental health care practitioners who work regularly at Canyon State Academy have been trained in:

- (a) How to detect and assess signs of sexual abuse and sexual harassment;
- (b) How to preserve physical evidence of sexual abuse;
- (c) How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and
- (d) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Canyon State Academy maintains documentation that medical and mental health practitioners have received the training referenced in this standard. Medical and mental health care practitioners also receive the training mandated for employees under *PREA Standard 115.331* or for contractors and volunteers under *PREA Standard 115.332*, depending upon the practitioner's status at the agency.

### Standard 115.341 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)

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Within 24 hours of a resident’s arrival at Canyon State Academy and periodically throughout their stay, the Case Manager (CM) completes the “Vulnerability Assessment Instrument” with the resident, summarizes it, and documents it in case notes. Information includes:

- (1) Prior sexual victimization or abusiveness;
- (2) Any gender nonconforming appearance, manner, or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse;
- (3) Current charges and offense history;
- (4) Age;
- (5) Level of emotional and cognitive development;
- (6) Physical size and stature;
- (7) Mental illness or mental disabilities;
- (8) Intellectual or developmental disabilities;
- (9) Physical disabilities;
- (10) The resident’s own perception of vulnerability; and
- (11) Any other specific information about the resident that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

This information is ascertained through conversations with the resident during the intake process and medical and mental health screenings; during classification assessments; and by reviewing court records, case files, program behavioral records, and other relevant documentation from the resident’s files.

During the intake phase of a resident’s participation in the program, the CM reviews all documentation collected during the intake process and revises the Vulnerability Assessment instrument as needed. As further information is collected during the resident’s ongoing treatment in the program, the Vulnerability Assessment instrument will be revised.

ROP/Canyon State Academy implements appropriate controls within the program on disseminating responses to questions asked pursuant to this standard to ensure sensitive information is not exploited to the residents’ detriment by staff or other residents. The Auditor recommended that a running log documenting access to the confidential Student Case Files be implemented as is the common practice in other ROP facilities. This was immediately implemented and Case Managers were trained on how to properly complete the log prior the Auditor’s exit interview.

Records for residents admitted to the facility during the past 12 months show evidence of appropriate screening within 24 hours of arrival.

### Standard 115.342 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.**

ROP/Canyon State Academy uses all information obtained pursuant to § 115.341 to make housing, bed, program, education, and work assignments for residents, with the goal of keeping all residents safe and free from sexual abuse. Any resident who is alleged to have suffered sexual abuse may be provided alternative housing.

By policy, lesbian, gay, bisexual, transgender, or intersex residents shall not be placed in housing, bed, or other assignments based solely on such identification or status, nor shall Canyon State Academy consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive.

In deciding whether to assign a transgender or intersex resident to a program for male or female residents and in making other housing and programming assignments, on a case-by-case basis the program shall consider whether a placement would ensure the resident's health and safety and whether the placement would present management or security problems.

Placement and programming assignments for each transgender or intersex resident will be reassessed at least twice each year to review any threats to safety experienced by the residents. A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration.

Transgender and intersex residents shall be given the opportunity to shower separately from other residents by using individual showers stalls and private bathrooms stalls.

### **Standard 115.351 Resident 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.**

Canyon State Academy's residents have multiple internal ways to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. This could include, but is not limited to, the following:

- (a) Student Grievance Form,
- (b) Student Statement Form,
- (c) Medical Request Form,
- (d) Student One-on-One Request Form,
- (e) The Grievance Procedure,
- (f) Direct verbal reporting to any staff member, and/or
- (g) Calling the abuse hotline number.

Phones are accessible through staff in living units. Canyon State Academy's residents have weekly calls home, are allowed visits at the facility every weekend, and may also be allowed to go on home visits.

All random interviews of Canyon State Academy's staff and residents confirm that they know they can report in writing through the grievance system, as well as verbally, anonymously, or through third parties.

### **Standard 115.352 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.**

ROP/Canyon State Academy has a Student (Resident) Grievance Program to address allegations of sexual abuse and harassment. This information is provided in the Student Handbook.

The Grievance Program does not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse. ROP/Canyon State Academy may apply otherwise applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse. ROP/Canyon State Academy does not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Nothing in this process restricts ROP/Canyon State Academy's ability to defend against a lawsuit filed by a resident on the grounds that the applicable statute of limitations has expired.

The Grievance Program ensures that:

- (1) A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and
- (2) Such grievance is not referred to a staff member who is the subject of the complaint. ROP/Canyon State Academy shall issue a final program decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by residents in preparing any administrative appeal.
- (3) ROP/Canyon State Academy may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. ROP/Canyon State Academy will notify the resident in writing of any such extension and provide a date by which a decision will be made.
- (4) At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.

A third party, including fellow residents, staff members, family members, attorneys, and outside advocates, is permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents. If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, ROP/Canyon State Academy may require as a condition of processing the request, that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. If the resident declines to have the request processed on his or her behalf, ROP/Canyon State Academy shall document the resident's decision.

A parent or legal guardian of a resident shall be allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such resident. Such a grievance shall not be conditioned upon the resident agreeing to have the request filed on his or her behalf.

ROP/Canyon State Academy has established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, ROP/Canyon State Academy shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final ROP/Canyon State Academy decision within five (5) calendar days.

The initial response and final decision shall document ROP/Canyon State Academy's determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

ROP/Canyon State Academy may discipline a resident for filing a grievance related to alleged sexual abuse only where the grievance program demonstrates that the resident filed the grievance in bad faith.

### **Standard 115.353 Resident 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.**

Compliance with this standard was determined by the following:

ROP/Canyon State Academy's policy states that residents have access to the Crisis Response Network for victim advocacy services for emotional support related to sexual abuse. The policy also provides residents with confidential access to their attorney, parole officer, other legal representation, and parents or legal guardians.

ROP/Canyon State Academy's PREA written materials and posters that are made available to residents provide contact information for these services. Canyon State Academy has documented attempts to enter into an MOU with the Crisis Response Network Advocacy Center to provide victim advocacy and emotional support related to sexual abuse. The Center's 24 hour hotline is (602) 222-9444 and their website at <http://www.crisisnetwork.org> provides additional resources and contact information. The Center was contacted by the Auditor and found to be acceptable.

### **Standard 115.354 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.**



Compliance with this standard was determined by the following:

ROP/Canyon State Academy's PREA Policy § 115.354 requires the facility to accept all verbal, written, and anonymous reports from any source, including third parties. Notice of how to report allegations are posted in the lobby and other areas of Canyon State Academy with the toll-free hotline number and other reporting options. This information is also included in the PREA Orientation materials and the PREA education video for residents. Third party reporting forms are available to visitors in the lobby of the facility and as a PDF form on Canyon State Academy's website.

### **Standard 115.361 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.**

ROP/Canyon State Academy's employees are trained to immediately report any knowledge, suspicion, or information they receive regarding sexual abuse or sexual harassment, retaliation against residents or staff who report such incidents, or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Interviews with the Program Director and Staff confirmed they are knowledgeable of their mandatory reporting duties.

### **Standard 115.362 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.**

ROP's policy "Prevention of Resident Sexual Assault and Abuse" meets the components of this standard. The policy states that if a resident was at risk of sexual victimization, they could temporarily be placed in another bedroom and/or living unit and the shift supervisor shall take other immediate appropriate actions to protect the resident. No Canyon State Academy residents have been placed in this status within the last 12 months. This was verified through interviews with randomly selected staff.

### Standard 115.363 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.**

ROP/Canyon State Academy's policy states the Program Director will report all allegations that a resident was sexually abused while confined at another facility to the Administrator of that other facility within seventy-two (72) hours. All correspondence will be documented. This policy was confirmed by an interview with the ROP/Canyon State Academy's Program Director, who stated he would report those allegations immediately.

ROP/Canyon State Academy received no allegations that a resident was sexually abused while confined at another facility in the past 12 months.

### Standard 115.364 Staff first responder duties

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

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

ROP/Canyon State Academy's PREA policy § 115.364 includes all of the components of this standard. All Canyon State Academy staff are trained in first responder duties. This was also verified through interviews with randomly selected staff and training records.

### Standard 115.365 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.**

ROP/Canyon State Academy has a written action plan (PREA Incident Response Follow Chart & Checklist) for responding to an incident of sexual abuse. The written plan coordinate actions, specifies which entities within Canyon State Academy are responsible for which actions, how actions should be sequenced, and which actions can occur concurrently with other actions. The PREA Incident Response Follow Chart & Checklist is very comprehensive.

**Standard 115.366 Preservation of ability to protect residents 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.**

ROP/Canyon State Academy is not a collective bargaining agency. Nothing in ROP/Canyon State Academy’s policies inhibits the facility’s ability to protect residents from contact with abusers.

**Standard 115.367 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.**

ROP’s policy states there will be no retaliation to any individual for making a sexual harassment charge toward a staff member(s) or anyone else. Residents, staff, contractors, volunteers, or third party reporters who choose to file a report of sexual abuse or sexual harassment, or cooperate with an investigation, shall not be subject to any form of retaliation related to the reporting of, or participation in, an investigation of such an act.

ROP procedures include:

ROP Policy 600.402 Student Problem Solving and Grievance Procedure protects all residents who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The Director of Student Services or designee is charged with monitoring retaliation against residents.

ROP Policy 100.402 Staff Protection (Whistleblower) protects staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other staff. ROP’s Program Director or Regional Human Resources representative is charged with monitoring retaliation against staff.

Canyon State Academy's Program Director shall employ multiple protection measures, such as housing assignment changes or transfers for residents that may be a victim or an abuser, removal of alleged staff abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, Canyon State Academy's Program Director shall monitor the conduct and treatment of residents or staff who reported the sexual abuse as well as residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff. Canyon State Academy's Program Director shall act promptly to remedy any such retaliation. Items Canyon State Academy's Program Director should monitor include any resident disciplinary reports, housing or program changes, negative performance reviews, or reassignment of staff.

Canyon State Academy's Program Director shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the case of residents, such monitoring shall be reviewed in Multi-Disciplinary Team (MDT) meetings.

### **Standard 115.368 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.**

ROP/Canyon State Academy's policy states that a resident may be placed in alternate housing for their personal protection. Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged. During any period of isolation, programs shall not deny residents daily large-muscle exercise and any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible.

### **Standard 115.371 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.**

ROP does not conduct criminal investigations. When the Program Director (or designee) conducts their own

administrative investigation into allegations of sexual abuse and sexual harassment, they shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Substantiated allegations of conduct that appear to be criminal shall be reported to local law enforcement for action and investigation. Substantiated allegations that appear to be criminal will be referred for prosecution. Criminal investigations will be conducted by the Maricopa County Sheriff's Department

Within the past six (6) months, there were two (2) sexual harassment allegations made by ROP/Canyon State Academy's residents. There were no substantiated sexual misconduct and sexual abuse allegations within the past 12 months.

### **Standard 115.372 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.**

ROP/Canyon State Academy's policy and procedures state that the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This policy was verified by interview with the Canyon State Academy's Program Director.

### **Standard 115.373 Reporting to residents**

- 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.**

ROP/Canyon State Academy reports the outcome of internal and external investigations to the resident victim. Following an investigation into a resident's allegation of sexual abuse suffered at Canyon State Academy, the Program Director will inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

If the Program Director did not conduct the investigation, the Program Director shall request the relevant information from any applicable law enforcement agency in order to inform the resident.

Following a resident's allegation that a staff member has committed sexual abuse against the resident, the Program Director shall subsequently inform the resident (unless the program has determined that the allegation is unfounded) whenever:

- (1) The staff member is no longer posted within the resident's living unit;
- (2) The staff member is no longer employed at the facility by ROP;
- (3) The Program Director learns that the staff member has been indicted on a charge related to sexual abuse within the Program; or
- (4) The Program Director learns that the staff member has been convicted on a charge related to sexual abuse within Canyon State Academy.

Following a resident's allegation that he has been sexually abused by another resident, the Program Director shall subsequently inform the alleged victim whenever:

- (1) The Program Director learns that the alleged abuser has been indicted on a charge related to sexual abuse within Canyon State Academy; or
- (2) The Program Director learns that the alleged abuser has been convicted on a charge related to sexual abuse within Canyon State Academy.

All such notifications or attempted notifications are provided to the resident in writing on a "Post Allegation Student Notification Response Form" by the Program Director (or designee) and are kept in the resident's Case Management file.

*Note: Obligation to report outcomes to the resident shall terminate if the resident is released from the Program.*

#### **Standard 115.376 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.**

There have been no incidents requiring staff discipline during the past three (3) year reporting period. The policy for imposing disciplinary sanctions is in place and interviews with the ROP Regional Director and Canyon State Academy's Program Director confirm compliance with this standard.

#### **Standard 115.377 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.**

Volunteers and contractors found to have participated in sexual activity with residents will be reported to law enforcement and social services agencies. ROP/Canyon State Academy will take appropriate remedial measures, prohibit volunteers and contractors from any further contact with residents, and deny them access to the facility.

There have been no incidents involving contractors and volunteers requiring corrective action during the past three (3) year reporting period.

### **Standard 115.378 Disciplinary sanctions for residents**

- 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.**

ROP/Canyon State Academy promotes a safe environment with established rules that are designed to protect the residents and staff. Residents shall understand the program rules as well as the consequences for not meeting them. Rule violations shall be addressed through a consistent and fair process as documented in ROP Policy 600.121 - Code of Conduct.

A ROP/Canyon State Academy resident will be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

Any disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the resident’s disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. In the event a disciplinary sanction results in the isolation of a resident, programs shall not deny the resident daily large-muscle exercise or access to any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents shall also have access to other programs and work opportunities to the extent possible.

The disciplinary process shall consider whether a resident’s mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.

ROP/Canyon State Academy offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. The Program Director shall conduct a Multi-Disciplinary Team (MDT) meeting to consider whether to offer the offending resident participation in such interventions. The program may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition of access to general programming or education.

The program will discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

### **Standard 115.381 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.**

ROP/Canyon State Academy screens all residents for prior sexual victimization or perpetration and provides mental health services. If the screening indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the facility will ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

If the screening indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the facility will ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be 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, or as otherwise required by Federal, State, or local law.

**Standard 115.382 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.**

ROP/Canyon State Academy’s resident victims have access to emergency medical and mental health services.

Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was verified by interviews with Medical Staff and the Program Director.

**Standard 115.383 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.**

ROP/Canyon State Academy offers medical and mental health evaluations for residents who have been sexually abused. Ongoing medical and mental health care is available for sexual abuse victims and abusers. The treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was verified by interviews with Medical Staff and the Program Director

Canyon State Academy will conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by qualified mental health practitioners.

### **Standard 115.386 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.**

ROP/Canyon State Academy’s policy is that the Regional Imbedded Improvement PREA Coordinator conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation. Such review shall be completed within 30 days of the conclusion of the investigation and a ROP Safe Environment Standards (SES) Administrative and Response Review Form shall be completed.

The Regional Improvement PREA Coordinator will submit a completed SES Administrative and Response Review Form to ROP’s Executive Director and the CEO within 30 days of the conclusion of the investigation.

The site management team and Regional Improvement PREA Coordinator shall:

- (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- (2) Consider 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 program;
- (3) Examine the area in the program where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- (4) Assess the adequacy of staffing levels in that area during different shifts;
- (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- (6) Prepare a report of its findings, including but not necessarily limited to, determinations made and any recommendations for improvement and submit such report to ROP’s Executive Director.

### **Standard 115.387 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.**

ROP/Canyon State Academy collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. ROP/Canyon State Academy aggregates the incident-based sexual abuse data at least annually.

The ROP/Canyon State Academy’s PREA Compliance Manager maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Data collected by the PREA Compliance Manager includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the US Department of Justice (DOJ).

The Regional Improvement PREA Coordinator aggregates the incident-based sexual abuse data at least annually. ROP’s Business Department shall provide all such data from the previous calendar year to the US DOJ no later than June 30, upon the US DOJ’s request.

**Standard 115.388 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.**

On an ongoing basis, ROP/Canyon State Academy reviews collected data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The Regional Improvement PREA Coordinator shall cause corrective action for any problem areas identified during the review and prepare an annual report of any findings and corrective actions taken by the facility.

Such reports include a comparison of the current year’s data and corrective actions with those from prior years as well as an assessment of the agency’s progress in addressing sexual abuse. The facility’s report is approved by the Program Director and information for accessing the report is available on the facility’s website at <http://canyonstateacademy.com>.

**Standard 115.389 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.**

By policy, ROP has made all aggregated sexual abuse data from Canyon State Academy readily available to the public through its website and updates the information annually. Before making aggregated sexual abuse data publicly available, ROP/Canyon State Academy shall remove all personal identifiers.

Sexual abuse data collected pursuant to § 115.387 has been and will continue to be maintained by ROP/Canyon State Academy for at least 10 years after the date of its initial collection unless Federal, State, or local law requires otherwise.

### **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.

William J. Benjamin

July 12, 2016

Auditor Signature

Date