

**PREA AUDIT REPORT**     Interim    Final

**ADULT PRISONS & JAILS**

**Date of report:** June 3, 2016

<b>Auditor Information</b>			
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<b>Date of facility visit:</b> May 4, 2016 – May 6, 2016			
<b>Facility Information</b>			
<b>Facility name:</b> L. V. Hightower Unit			
<b>Facility physical address:</b> 902 FM 686, Dayton, TX 77535			
<b>Facility mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Facility telephone number:</b> (936)258-8013			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Maricia Jackson, Senior Warden			
<b>Number of staff assigned to the facility in the last 12 months:</b> 314			
<b>Designed facility capacity:</b> 1384			
<b>Current population of facility:</b> 1305			
<b>Facility security levels/inmate custody levels:</b> G1, G2, G4			
<b>Age range of the population:</b> 18 – 83			
<b>Name of PREA Compliance Manager:</b> Joshua Santiago		<b>Title:</b> Unit Safe Prisons PREA Manager	
<b>Email address:</b> Joshua.Santiago@tdcj.texas.gov		<b>Telephone number:</b> (936)258-8013 ext.7315	
<b>Agency Information</b>			
<b>Name of agency:</b> Texas Department of Criminal Justice			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> State of Texas			
<b>Physical address:</b> 861-B I-45 North, Huntsville, TX77320			
<b>Mailing address:</b> <i>(if different from above)</i> P. O. Box 99 Huntsville, TX 77342			
<b>Telephone number:</b> (936) 295-6371			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Brad Livingston		<b>Title:</b> Executive Director	
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<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> William Stephens		<b>Title:</b> Director, Correctional Institutions Division	
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## AUDIT FINDINGS

### NARRATIVE

A PREA audit of the L. V. Hightower Unit, a facility within the Texas Department of Criminal Justice, was conducted May 3, 2016 through May 6, 2016. Approximately three weeks prior to the site visit, the agency forwarded a thumb drive which contained the completed Pre-Audit Questionnaire (PAQ), supporting documentation for each standard, and interviews with executive staff completed within the past year. After review of these documents, an issue list for additional documentation and clarification related to the standards was forwarded to the agency.

The evening before the site visit, this auditor dined with Warden Maricia Jackson, key members of her staff, and members of the ACA audit team who were completing an audit earlier in the week. This auditor was provided staff rosters by shift, special offender listing, and offender roster by housing unit.

The entrance meeting began with the following persons in attendance:

Vicki Mossbarger, Regional PREA Manager  
Cassandra McGilbra, State PREA Manager  
Leonard Echessa, Region III Director  
Stephen Massey, Assistant Region III Director  
Warren Worthy, Major  
Paul Hill, Captain  
Maricia Jackson, Warden  
Brittany McShan, Sergeant  
Joshua Santiago, CO IV – Unit PREA Manager  
Christopher Norsworthy, Assistant Warden  
Sandra Mikler, CO IV  
Tawn Roddy, Assistant Regional III Director  
Marianne Gott, Human Resource Specialist  
Carol Hajovsky, Warden Secretary

Interviews with staff and offenders began while unit administration was completing the ACA audit. The facility tour began in the afternoon and included: offender housing areas, segregation, line building, program areas, education building, maintenance, general and law libraries, laundry, commissary, food preparation and dining areas, medical department, count room, grievance and disciplinary offices and maintenance. The following day the tour resumed with an inspection of the garment factory, and 1 and 2 buildings. Photographs were taken throughout the tour.

This auditor completed twenty-two informal staff interviews and twenty-six formal staff interviews. Interviews included: random staff, security supervisors, and first responders from each shift, investigators, staff conducting risk assessments, staff responsible for monitoring retaliation, and conducting incident reviews, intake staff, intermediate staff, and medical and mental health staff. One volunteer was interviewed.

This auditor completed twenty-two informal offender interviews and twenty-eight formal offender interviews. Interviews included: random offenders from each housing area, and specialized interviews. There were no offenders in segregation for risk of sexual victimization. Youthful offenders are not housed at this facility. Qualified staff interpreters provided translation during the audit during interviews with non-English speaking offenders.

The agency has a zero tolerance policy for all forms of sexual abuse and sexual harassment. This audit revealed that staff and offenders are provided quality training as it relates to the PREA standards. Staff

is aware of agency procedures for responding to allegations of sexual abuse. Offenders are aware of the agency's commitment to zero tolerance for sexual abuse and sexual harassment, reporting options, and support services. Offenders reported feeling safe in the facility. Offenders trust that staff will not tolerate sexual abuse or harassment and will respond promptly if such a report is received. Offenders also reported that the culture has changed and there is little tolerance for sexual abuse or sexual harassment among offenders.

There were nine allegations of sexual abuse during this audit period. The investigation into these allegations was thorough, and complied with agency policies and PREA standards. Investigators received the required training and were knowledgeable about their duties. The TDCJ has a very well developed system for reporting incidents, investigating incidents and follow-up for incidents within their facilities. Security staff was knowledgeable about how to respond to allegations of sexual abuse, evidence preservation, victim rights, and victim protection.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

The L. V. Hightower Unit is a medium to minimum security unit located five miles from Dayton, Texas, in Liberty County. The unit is a state run facility. The facility was built in 1990 and is located on 394 acres with is shared with the Henley and Plane State jails. There are two secure recreation areas within the secure perimeter. The recreation areas provide toilet facilities which are surrounded by half walls for privacy. The facility consists of twelve buildings within the secure fencing.

The administration building houses the mailroom, Records Office, Accreditation Office, Information Technology, Human Resources, Warden's Offices, Warden's secretary, Offender contact and non-contact visitation areas and Central Control. There is PREA related signage on bulletin boards and artistic, eye catching PREA related paintings on the walls in the visitation area. The strip search area for offenders entering and exiting visitation provides privacy during the search.

The Education Department provides offices for Chaplaincy, Re-entry programming, general and legal libraries, educational and vocational classrooms. PREA signage is visible throughout the building as well as PREA related paintings on the walls. Restrooms provide privacy for offenders. Offices have large windows allowing for easy viewing. The window in the strip search area is partially painted allowing for privacy during strip searches. Security mirrors are present down both hallways. The libraries have lowered cabinets and shelves with no blind spots.

The Service building contains the laundry, commissary, offender and officer dining, kitchen and medical department. PREA signage and paintings are visible throughout this building. Offender toilet facilities provide privacy for offenders while allowing security staff to easily view offenders. Offices have windows to allow for easy viewing. In the laundry, security mirrors are located near the pressing cage and over the stock room. Offender restrooms in the commissary have privacy screens. The chemical room and Lint Trap Room is supervised when offenders have to work in the area, otherwise these rooms are locked. The commissary has security mirrors in the corner of the entry door and above the stairs. This mirror is placed to allow viewing upstairs. The warden indicated additional mirrors are on order for the commissary. Offenders use the restroom on the recreation yard. The dining areas have signage posted on walls in English and Spanish. Windows in the offender restroom areas are partially painted for privacy. The medical department has a strip search area in the holding area and affords privacy. The offices have windows but afford privacy during interviews.

The Line building contains the offices for: Classification, Grievance, Parole, Offender Property, Disciplinary/Counsel Substitute, Security Threat Group/Safe Prison, Disciplinary Captain, Building Captain, Major, and Unit Supply. Administrative segregation is also in this building. PREA signage is posted throughout the building. Offices have large windows allowing for easy viewing. The administrative segregation shower area presented some concerns for privacy but the warden explained that male officers supervise all showers in this area, out of sight of the female officer.

The Maintenance building utilizes security mirrors to allow for viewing into the main maintenance area. The Garment factory has zero tolerance signage and PREA paintings throughout the building. Mr. Green, the Garment Factory supervisor explained the strip search procedure. Waist high privacy panels are configured in a manner to require offenders to approach in single file. When the offender approaches the strip search area additional partitions are configured in a manner to allow for privacy from other offenders and female staff. Offenders are searched individually. There was concern about windows in the entrance door that allowed viewing into the search area. This was corrected immediately by repositioning the partitions.

The living areas have two designs: an open dorm design with first and second floors. The toilet and shower areas are on the first floor. A half wall limits viewing into the area from the entrance and control booths. Within the shower and toilet area movable partitions are provided as well as shower curtains with visibility at the top and bottom but solid material in the waist area. The cell block housing has toilets inside each double occupancy cell. The shower area has metal half doors that afford privacy yet do not inhibit security viewing.

## **SUMMARY OF AUDIT FINDINGS**

On May 4<sup>th</sup> through May 6<sup>th</sup>, 2016 a site visit was completed at the Hightower Unit. The final report was provided on June 3, 2016. The results of the audit are listed below.

Number of standards exceeded: 0.

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

**Standard 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)

Executive Order 3.03, SAFE Prisons /PREA Program states, the agency has zero tolerance for all forms of sexual abuse and sexual harassment. The order states the TDCJ will be vigilant in creating a safe environment for staff and offenders. The Safe Prison PREA Plan outlines the agency’s proactive approach for prevention, detection, and punishment for sexual abuse and sexual harassment. This plan includes definitions of prohibited behaviors, and sanctions for offenders, staff, volunteers, and contractors who engage in sexual abuse.

This order appoints Mr. Williams Stephens, Director of the Correctional Institution Division as the agency-wide PREA Coordinator. The Correctional Institution Director (CID) reports directly to the Executive Director. An interview with the Correctional Institution Director, dated August 26, 2015, was reviewed. The Safe Prison PREA Manager reports to the Deputy Director of Management Operations, who in turn reports to the CID.

The PREA Coordinator is tasked with the development of the TDCJ SAFE Prisons/PREA program. A Safe Prison/PREA Program Office (SPPMO) has been established at the agency’s central office. This office is responsible for monitoring the incidence of offender sexual abuse and providing statistical analysis regarding the frequency of reports. The agency Safe Prison PREA Manager (SPPM) directs this office.

The agency has Unit Safe Prison/PREA Managers in each facility. The SPPM coordinates assists and provides technical assistance to the facilities to comply with the Safe Prison/PREA Plan. The SPPM works directly with Regional Safe Prison/PREA Managers (RSPPM). The RSPPM assists with the implementation and monitoring of the Safe Prison PREA Plan within the assigned region. The facility warden assigned Sgt. Jason Santiago to serve as the Unit Safe Prison/PREA Manager. Sgt. Santiago has sufficient time and authority to coordinate the facility’s PREA responsibilities.

The agency is in compliance with this standard.

Compliance Determined By:

Review of Executive Order 03.03 Agency Organizational Chart  
Interview of the Agency PREA Coordinator (CID)  
Safe Prison/PREA Plan  
Interview with the Unit Safe Prison/PREA Manager

**Standard 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 Safe Prison PREA Plan mandates that any new contract or contract renewal for the confinement of

offenders requires the adoption and compliance with TDCJ policies and procedures. Although the Hightower Unit is a state facility, the State of Texas does contract for the confinement of offenders.

Administrative Directive 02.46, Employees of Private Businesses and Governmental Entities Contracting with TDCJ require contract employees to comply with certain TDCJ policies, which includes compliance with the PREA standards. The agency provided an example of a standard contract with a privately managed facility. This contract included the requirement that the contractor comply with the PREA standards.

The TDCJ requires all new and renewed contracts for the confinement of offenders to comply with the PREA standards. A contract monitor is assigned to monitor compliance with all contract requirements to include monitoring for compliance with the PREA standards.

The Contract Agency Contract Administrator was interviewed on September 21, 2015 by auditor Jeffrey Nobles. A copy of this interview was provided to this auditor. There are sixteen (16) contracts for the confinement of offenders. Of these private facilities, twelve (12) completed PREA audits, one audit was completed and the agency expects the report in mid-June and the remaining three (3) are scheduled for audits. The agency requires all completed audit reports to be sent to the TDCJ.

Compliance Determined By:

Review of Interview – Contract Agency Contract Administrator  
Review of Contract for Confinement of Offenders  
Job Description – Agency Contract Administrator

### **Standard 115.13 Supervision and monitoring**

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

The Security Operations Office monitors and directs staffing plans and shift rosters for all facilities. Security rosters are developed from the staffing plan. The Security Operations Office is the only department authorized to make changes to the shift rosters. The warden must request changes by submitting a request to the Security Operations Office.

The staffing plan was reviewed and reflects all budgeted positions, posts, and required coverage for each post. Positions are designated as priority one and priority two positions. All priority one positions must be manned at all times. Staff assigned to priority two positions may be pulled as needed to staff priority one positions. In the event priority one positions cannot be filled, the duty officer must contact the regional director. A determination will be made if overtime should be authorized or other operational considerations should be implemented.

Review of agency policies and interviews with the warden and PREA manager confirm that the staffing plan takes into consideration generally accepted detention practices, findings of inadequacies from internal or external oversight bodies, the physical plant with emphasis on blind spots, and areas where staff or offenders may be isolated, composition of the offender population and the number and placement of supervisor staff. The plan also considers any judicial findings or findings from federal investigative agencies. There are no such findings during this audit period.

The staffing plan was predicated on the facility capacity of 1384. The average daily population is 1228. The staffing plan review includes a review of video monitoring, prevalence of substantiated and unsubstantiated reports of sexual abuse from the prior year, and other operational considerations. The annual reviews are coordinated through the Security Operations Office in consultation with the Regional Office and the agency PREA Manager. The staffing plan, staffing plan reviews, and shift rosters were reviewed and reflect compliance with this provision of the standard.

Security supervisors are required to conduct unannounced rounds on all shifts. The security major, captain, lieutenant, and sergeant are required to conduct these rounds. The post orders for each of these positions was reviewed and reflect this requirement. These rounds are documented on the Building Turn out Roster and log books maintained in each building control center. Turnout rosters and building log books were reviewed and confirm that unannounced rounds are conducted and documented as required with this provision of the standard.

The agency policy prohibits alerting other staff of unannounced rounds, commonly referred to as "jiggering". Unannounced rounds are conducted on each shift and documented on the daily turnout roster. Security supervisor interviews indicated that this is not a problem at the facility. Tactics utilized by supervisors to prevent this include: monitoring for radio signaling, making irregular checks of the housing areas and entering through emergency doors.

Compliance Determined by:

Review of Administrative Directive 11.52, Security Staffing  
Security Operations Procedures Manual (SOPM) 7.02 and 8.06 Facility Staffing plan  
Annual Reviews  
Facility turn out rosters  
Interviews with the warden, PREA staff, and security supervisors

#### **Standard 115.14 Youthful inmates**

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

Unit Classification Procedure 4.19 directs that all male youthful offenders are assigned to the Clemens and Byrd facilities. All female youthful offenders are housed at the Hilltop unit. Youthful offenders are not housed at the Hightower facility. This standard is not applicable.

Compliance Determined By:

Unit Classification procedure 1.19, Youthful Offenders  
Interviews with facility administrators and staff

#### **Standard 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)

Administrative Directive 03.22, Offender Searches, mandates that strip searches and body cavity searches must be conducted by same gender staff except in extraordinary circumstances. These searches must be approved by a supervisor and documented by the shift supervisor on an Interoffice Communication Form. This documentation is forwarded to the Unit Safe Prison PREA Manager. Cross gender strip searches are also documented on a Cross Gender Search Log. The Hightower Unit is an all-male facility. Standard provisions 115.15 (B) and (c-2) relate to female offenders and do not apply to this facility

Female staff is required to announce their presence when entering a housing area. A posting is affixed to each housing area door instructing female staff to announce their presence. Interviews with offenders and staff and observations during the tour confirmed that these announcements are made routinely. The plan requires opposite gender staff to announce their presence when entering the housing areas. The facility post orders also include instructions for opposite gender staff to announce their presence.

The PAQ indicates there were ten (10) cross gender strip searches conducted by female (non-medical) staff and that none of these searches were conducted for exigent circumstances. The facility warden explained that in the past female correctional officers attending the academy were required to strip search a male offender to demonstrate proficiency in the event the officer was required to conduct such a search in exigent circumstances. This practice was addressed in an earlier audit and has since been discontinued.

The Safe Prison/PREA Plan requires that correctional officers must make their best effort to afford offenders privacy when showering, performing bodily functions, and changing clothing, except in exigent circumstances.

The shower and toilet area in the open dorms have a partial wall which provides privacy for offenders and allows officers to view the offender's head and shoulder areas. Moveable privacy panels are provided for the toilet and shower areas as well. There was one complaint regarding privacy in the dorms. The concern was visibility into this area by staff from the stairs. This auditor viewed these areas from the stairs and found the stairs did not present privacy concerns as long as offenders used the privacy panels provided by the facility.

The shower area in the cell blocks is well designed. Each shower has a half door which allows for privacy for the offender but also allows officers to easily monitor the area for offender safety. Toilets are in each double occupancy cell. Viewing is incidental to routine cell searches as noted in informal and formal discussions with staff and offender and observations on the facility tour.

There are half walls with urinals on the recreation yards. There are half walls with a privacy panel for searching offenders leaving the area. The search procedure for the garment factory entailed the positioning of privacy panels into a maze like configuration. Female staff is positioned away from the search area. The search area is set up near the entrance and exit door. This door has windows which do allow visibility into the search area. This concern was immediately addressed and resolved by reconfiguring the placement of the panels. Offenders are strip searched individually when exiting the visitation area, where privacy panels are also utilized.

The shower area in segregation does not afford privacy for the offenders from viewing by female staff. To address this problem, the facility has established set shower hours. Male staff report to

this area and supervise shower call. Female staff remain out of line of sight during this period.

The Safe Prison/PREA Plan prohibits staff from searching or examining a transgender or intersex offender solely to determine their gender status. The policy provides that gender status may be determined through conversations with the offender, review of medical records, or through a private medical exam conducted by a medical practitioner. Interviews with staff and offenders confirmed that this is the practice of this facility.

The curriculum for the pre-service training course entitled Contraband and Shakedown was provided. The training addresses the proper searching of male and female offenders, as well as transgender and intersex offenders. The PAQ states 100 % of all security staff have been trained to conduct cross gender pat down searches and searches of transgender and intersex offenders. During interviews several officers were asked to explain the proper search procedure. All of these officers were able to do so.

Compliance Determined By:

Administrative Directive 03.22, Offender Searches  
Pre-service Curriculum for Contraband and Shakedown  
Post Orders  
Safe Prison PREA Plan  
Observations during site visit  
Random interviews with offenders, staff, and special populations.

**Standard 115.16 Inmates with disabilities and inmates who are limited English proficient**

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

The agency has provisions to ensure all offenders have access to PREA information concerning prevention, detection, and response to sexual abuse and sexual harassment. The Safe Prison/PREA Plan and Administrative Directive 04.25 – Language Assistance Services for Offenders Identified as Monolingual Spanish-Speaking, specifies that offenders who are deaf or visually impaired, limited English proficient or otherwise disabled are provided information in formats accessible to them.

The agency provides interpretive services for Spanish speaking offenders through trained staff within the agency. To qualify to be an interpreter, staff must score at Level 4 or 5 on the Language Assessment Skills - Spanish Oral Proficiency test. If an offender speaks a language other than Spanish, the facility contacts Martha Layman who is in charge of interpreter services for the agency. The agency uses Berlitz Translation Services for interpreter services. The agency also maintains a listing of bi-lingual employees throughout the agency who speak languages other than Spanish, who can assist in the event of an emergency. The medical department provides a separate interpretive service through Pacific Interpreters. During the audit several non-English speaking offenders were interviewed. A trained staff interpreter for the facility provided translation through the interview and was quite proficient. Staff understood that offender interpreters were not allowed and confirmed they were not utilized at the facility.

The Safe Prisons/PREA Operations Manual requires Zero Tolerance postings throughout the facility in English and Spanish. At a minimum, this information must be posted in the following areas:

Warden's Office, Employee Breakrooms, Offender and employee dining rooms, law library, general library, housing areas, offender work and educational areas, visitation areas and other areas as determined by the warden. Postings were found in each of these areas.

Offenders who are blind, deaf, or mentally ill are not housed at this facility. PREA information is available to offenders through a video which provides closed captioning and through numerous signs placed throughout the facility. The medical department will contact the Assistive Disability Services department who will provide an Advanced, Master, or equivalent ASL interpreter.

Compliance Determined by:

Administrative Directive 04.25, Language Assistance Services for Offenders Identified as Monolingual Spanish-Speaking

Administrative Directive 06.25, Qualified Interpreter Services- American Sign Language

Correctional Managed Health Care policy G 51.1, Offenders with Special Needs

Safe Prison PREA Plan

Interviews with staff and offenders

Observations during facility tour

#### **Standard 115.17 Hiring and promotion decisions**

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

The Safe Prison/PREA Plan states the agency shall not hire an employee or contractor or promote anyone who may have contact with offenders who have engaged in sexual abuse in prison, jail, lockup, community confinement, or juvenile facilities or who has been administratively or civilly adjudicated to have engaged in these activities. The TDCJ has a system of collecting criminal information on contractors and employees on a daily basis. TDCJ contacts previous institutional employers and asks about misconduct and about resignations in lieu of termination for such conduct, as outlined in this standard. This information is documented. The TDCJ also provides this information to institutional employers upon request.

The Human Resource department for the agency conducts pre-employment information and criminal background checks. Because this department is located in Huntsville, Texas, a previous interview with Human Resource staff was provided. This interview was reviewed during this audit. A random selection of records revealed that criminal background checks are conducted as required in this standard provision.

The TDCJ considers acts of sexual abuse or harassment when making hiring or promotion decisions. Employees also have a continuing duty to report such information. During annual in-service training, staff is asked about such misconduct. Failure to disclose such information during employment with TDCJ or previous employers is grounds for termination.

Compliance Determined by:

Example of information received from the Criminal Justice Information System

Review of Human Resource information  
Executive Directive PD-71, Selection System Procedure  
Review of Prior Interview with Human Resource  
Interviews with staff  
Review of Human Resource Record Information

### **Standard 115.18 Upgrades to facilities and technologies**

- 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 PAQ states and the warden confirmed that the facility has not made any substantial expansions or modifications to since August 2012, with the exception of additional cameras placed in the visitation area. Cameras are placed in the dorm wings, but there are no cameras in the cell blocks. The warden hopes to have additional cameras and security mirrors installed in the future. Cameras are monitored from a central location and are stored for approximately thirty days.

Compliance Determined by:

Interview with Warden  
Observations during the facility tour  
Informal discussions with facility staff

### **Standard 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 agency is responsible for conducting administrative and criminal investigations of sexual abuse to include offender-on-offender sexual abuse and staff-on-offender sexual abuse and misconduct. The Office of the Inspector General conducts all investigations of incidents of criminal acts. All allegations of sexual abuse or harassment are referred to OIG. Administrative Directive 16.03 – Evidence Handling provides excellent procedures for handling evidence and securing a crime scene. Office of Inspector General Policy OIG-04.25 Offender Sexual Assault Investigations complies with the Department of Justice Office on Violence Against Women publication, A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, second edition.

Facility investigators were interviewed and were knowledgeable about crime scene preservation, preserving forensic evidence, the dynamics of sexual abuse in a correctional setting and the agency's procedures for conducting these investigations.

Senate Bill 1191 – Chapter 323. Emergency Services for Survivors of Sexual Assault, requires that one or more healthcare facilities will be designated as the primary healthcare facility for the community. This healthcare facility will be required to provide emergency medical services and evidence collection for sexual assault survivors on a community or area wide basis. The bill affords the survivor the right to a forensic medical exam, a private area, if available, to wait or to speak to

medical, legal, or sexual assault crisis center staff or volunteer until a physician, nurse or physician assistant is ready to treat the survivor. Those that perform the forensic medical exam are required to have basic forensic evidence collection training that is approved or recognized by the appropriate licensing board. Victims are not charged for medical care or forensic exams related to the sexual assault.

There are two hospitals in the general vicinity of the facility. Both hospitals provide SANE nurses. The hospital was contacted during the audit and confirmed that SANE nurses are available to conduct forensic examinations when needed.

The TDCJ has made efforts to access the services of rape crisis centers statewide. William Stephens, Corrections Institutional Division Director and agency PREA Coordinator sent a letter requesting sexual assault victim advocacy services to all rape crisis centers throughout Texas associated with the Texas Association Against Sexual Assault. This letter explained the requirements of the PREA law and requested a partnership to provide services for victims within the agency. Some rape crisis centers responded and entered into a Memorandum of Understanding with the TDCJ to provide services. There was no affirmative response for rape crisis centers in the area of the Hightower facility. The TDCJ trained employees to provide these services. This staff is available to accompany the offender to the hospital and to provide support services through the investigation process. Documentation of trainings was reviewed. Further, addresses and phone numbers rape crisis centers are provided to the victims, despite not having an MOU.

Compliance Determined by:

Safe Prison PREA Plan  
Administrative Directive 16.03, Evidence Handling  
Safe Prison/PREA Operations Manual  
OIG 04.25, Offender Sexual Assault Investigations  
Interview with SANE nurse  
Training Records

### **Standard 115.22 Policies to ensure referrals of allegations for investigations**

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

Board Policy 01.07 establishes The Office of the Inspector General (OIG) as an independent office, reporting to the Texas Board of Criminal Justice. This office serves as the investigative and law enforcement entity for the agency. Administrative investigations are conducted at the facility level by trained facility investigators. Criminal investigations are conducted by OIG investigators. If the evidence is sufficient for criminal prosecution, the OIG Office refers the case to the county prosecutor. These referrals are documented and the OIG office maintains contact with the prosecutor's office until the case is resolved. Incidents of alleged sexual abuse (offender-on-offender or staff-on-offender) are reported to the OIG through the Emergency Action Center. The OIG decides if a forensic exam is indicated and instructs staff concerning crime scene preservation, evidence collecting and the like. The agency policy regarding the referral of sexual abuse or sexual harassment for criminal prosecution is published on the agency website.

During the past twelve (12) months there were ten (10) incidents referred to the OIG. None of these incidents were criminal in nature. Facility investigators conducted the administrative investigation.

Each investigation was completed at the time of the audit.

Compliance Determined By:

Interviews with investigators

Review of investigations

Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents

AD 16.20, Reporting Incidents/Crimes to the Office of the Inspector General

Board Policy 1.07, Inspector General Policy Statement

OIG Procedure 04.05, Offender Sexual Assault Investigations

### **Standard 115.31 Employee training**

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

The Safe Prison PREA Operations Manual requires comprehensive PREA training of all employees. This training is provided in pre-service training, in-service, and refresher training. A script of the video entitled, Safe Prisons PREA in Texas was reviewed. This video thoroughly addresses each required subject in this standard. Executive staff participates in the presentation of the material which emphasizes the importance of this subject to employees.

Administrative Directive 12.20, Implementation and Operation of the TDCJ In-service Training Program for Uniformed and Non-Uniformed Employees requires all employees to receive forty (40) hours of in-service training each fiscal year. In fact, this training is provided to employees annually and at turnout and leadership training courses. This exceeds the requirements of this standard. This required training was completed by 99.4% of employees.

Executive Directive 12.10, TDCJ Training Database outlines the requirements for entering and maintaining employee training records in the database. Employees who are reassigned from facilities housing the opposite gender are provided additional training. The Gender Specific Training schedule was reviewed.

A random selection of training records were reviewed and confirmed the training is being provided as outlined in this standard provision.

Compliance Determined by:

Gender Specific Training Schedule

Safe Prisons/PREA in Texas – Video Script

AD 12.20, Implementation and Operation of the TDCJ In-Service Training Program for Uniformed and Non-Uniformed Employees

Correctional Training and Staff Development – In-service Training, Safe Prisons/PREA Program Lesson Plan

Executive Directive 12.10, TDCJ Training Database

Review of Employee Training Records

### **Standard 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)

Administrative Directive 7.35, Administration of Volunteer Services requires an agency-wide plan that includes the training of all agency volunteers. The TDCJ Volunteer Training and Orientation Handbook was reviewed and addresses the agency's zero tolerance policy, provides definitions of and consequences for prohibitive behaviors, and details reporting mechanisms for reporting sexual abuse and sexual harassment.

The agency has provided PREA training for 22,697 volunteers and 16 contractors. The level and type of training provided is based on the services provided. Volunteers sign a Volunteer Training and Orientation form acknowledging receipt of the TDCJ Volunteer Training and Orientation Handbook and acknowledging that they attended and understood the training provided. Interviews with volunteers and contract employees support compliance with this standard.

Compliance Determined by:

Safe Prisons/PREA Plan  
Volunteer Training Attendance and Acknowledgement forms  
Administrative Directive 7.35, Administration of Volunteer

### **Standard 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)

The Hightower Facility is not an intake facility. During intake offenders are provided PREA information through a pamphlet, Offender Handbook and PREA video. Offenders transferred to the Hightower facility also receive written PREA information and view the PREA video. Trained peer educators also provide training to newly transferred offenders. Offender education is documented and is available on the TDCJ data base. This data base maintains records of the offender's participation in training at each facility in which the offender is housed.

Most non-English speaking offenders in the Texas system are Spanish speaking. All PREA education material, posters, signage, videos, and the like are available in Spanish. The TDCJ has a program for certifying TDCJ as interpreters. There are several Spanish speaking interpreters at the Hightower facility. While interviewing non-English speaking offenders, a facility interpreter was used and demonstrated excellent interpretive skills. The facility makes attempts to provide a trained interpreter for each shift. Interviews with staff and offenders confirmed that staff interpreters are available when needed.

Offenders who are blind, deaf, or seriously mentally or cognitively impaired are not housed at this facility. Offenders with impaired vision are provided information upon transfer through the PREA video. Offenders with hearing loss receive this information through pamphlets, and the PREA video

(closed captioning).

PREA information is readily available to offenders through the Offender Handbook, and PREA Pamphlets and brochures. The signage throughout the facility is very well done. PREA information is painted on walls throughout the facility to include visitation, education and program areas, and housing areas. Information is also posted on offender bulletin boards, law library, and general library.

Compliance Determined by:

Unit Classification Procedure 5.0, Orientation Procedures  
TAAASA Brochure – Prison Rape (English and Spanish)  
Interviews with staff and offenders  
Offender Handbook  
Observations on the facility tour

**Standard 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 facility and agency investigators have received the general PREA training provided to all employees and training in conducting administrative and criminal investigations. Facility investigators are responsible for conducting administrative investigations and OIG investigators are responsible for conducting criminal investigations.

OIG policy 2.15, Training Procedures, outlines the required training for all OIG investigators. Investigators are required to be licensed as peace officers. OIG investigators attend NIC PREA Investigation Training and are tested to ensure the material presented was understood by the investigator. The lesson plan for course 2029, Interview and Interrogation and course 3201 Sexual Assault Investigative Topics were reviewed during the audit. Both courses are required for OIG investigators. The specialized training provided to investigators include techniques for interviewing sexual assault victims, proper use of Miranda and Garrity warnings, sexual abuse in confinement settings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Facility administrators attend a course entitled, Safe Prisons/PREA Investigation Training. Training records for facility investigators was provided.

Compliance Determined by:

Interviews with Investigators  
OIG 02.15, Training Procedures  
Lesson Plan 2029 – Interview and Interrogation  
Lesson Plan 3201 – Sexual Assault Investigative Topics

**Standard 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)

The TDCJ has contracted with the University of Texas, Medical Branch to provide medical and mental health care at the Hightower facility. The contractor is responsible for providing the specialized training required by the PREA standards, for medical and mental health staff.

The orientation of new healthcare employees, both full and part-time, includes training in the detection, assessment, and response to offender-victims of sexual abuse and sexual harassment, the preservation of physical evidence, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Employees must pass a post test at the conclusion of the training to ensure they understand the material. Annual refresher training is also provided to ensure healthcare employees know the current sexual abuse and harassment policy and procedures. Healthcare staff attends the annual PREA refresher training that is provided to all employees. The facility's healthcare providers do not provide forensic exams. These exams are provided by qualified healthcare providers at a local hospital. There is no cost to the offender for these exams. Interviews with employees and review of training logs confirmed that healthcare staff is provided the training required in this standard.

Compliance Determined by:

CMHC Policy C-25.1, Orientation Training for Health Services Staff  
 CMHC Policy C-19.1, Continuing Education/Staff Development  
 Post Test – Medical and Mental Health Training  
 Training logs  
 Interviews with medical and mental health staff

**Standard 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)

All offenders are assessed for risk of sexual victimization or sexual aggression at TDCJ intake facilities. The risk assessment is completed by agency sociologists. Offenders are reassessed upon transfer to another facility. The Unit Safe Prison/PREA staff complete this assessment the day the offender arrives at the facility. The risk screening is provided to the Unit Classification Committee.

There were 1,199 offenders received at the Hightower Unit in the past 12 months, whose length of stay was 72 hours or longer. Of these offenders 100% were assessed for risk levels within 72 hours. Interviews with staff and offenders confirmed that offenders received this screening on the day of their transfer to the Hightower facility, as required by agency policies, which exceeds the requirements of this standard.

The agency has developed an excellent screening assessment tool. The Offender Assessment Screening form includes questions regarding an offender's age, mental, physical build, and developmental disabilities, previous incarcerations, a non-violent criminal history, whether the offender has prior convictions of sexual abuse of a child or adult, whether the offender engaged in sexual abuse or violence in an institution, whether the offender is or is perceived to be gay,

lesbian, bisexual, transgender, intersex, or gender non-conforming; previous sexual victimization and sexual abusiveness. The offender's opinion of their risk of sexual assault or harassment is also considered. Offenders are not disciplined for refusing to answer or not disclosing information on the Offender Assessment Screening form. Following the assessment, the classification committee meets with the offender; reviews risk assessment information and additional information received from medical and mental health staff, security and other sources. Offenders are reassessed if new information is received, upon referral or request, or following an incident or sexual abuse. The risk assessment is placed in the offender's classification folder in the Records Office.

Compliance Determined by:

Interviews with offenders and staff  
Safe Prison/PREA Plan  
Safe Prison/PREA Operations 3.01, Offender Assessment Screening

**Standard 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 UCC typically meets with the offender on the day of transfer. The UCC uses information from the risk screening to make housing, bed, program, and work assignments. The Safe Prison/PREA Plan requires states that these decisions are made on an individual basis.

Housing, work, and program placement for transgender and intersex offenders is also done on an individual basis, with consideration given to the offender's view of their safety. The Unit Classification Committee meets with these offenders at least every six (6) months to review any threats to safety experienced by the offender. Interviews with staff and offenders confirmed that transgender and intersex offenders are seen at a minimum every six months and that staff are responsive to any reports of harassment or abuse from other offenders or staff. The Hightower Unit does not house transgender or intersex offenders in dedicated housing areas. The offenders interviewed were living in general population.

Compliance Determined by:

Administrative Directive 04.17, Offender Housing Assignment Criteria and Procedures  
Safe Prison/PREA Plan  
Interviews with staff and offenders

**Standard 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 Safe Prison PREA Plan restricts facilities from placing offenders at high risk for sexual victimization in protective housing unless no other housing options are available to separate the

offender from likely abusers. If the assessment of alternative housing options cannot be performed immediately, it must be completed within 24 hours. The offender is placed on transient status where they are separated from the general population until alternative housing can be arranged, not to exceed 24 hours. Offenders at high risk of victimization will only be assigned to protective custody while an alternative means of separation is arranged, not to exceed 30 days.

The Administrative Segregation Plan outlines the privileges afforded to those offenders placed in protective custody to ensure sexual safety. The plan direct the units to provide out of cell recreation seven (7) days per week for one hour or five (5) days per week for two hours per day. Outside recreation is available weekly. Recreations and exercise equipment is provided. Offenders are afforded visitation and commissary privileges as well as in-cell educational opportunities. If privileges are restricted, the facility must document the specific opportunities that have been restricted, and the reason(s) and duration of the restrictions. No offenders have been assigned to protective custody during this audit period.

The Administrative Segregation Plan requires that the unit classification committee will conduct an initial review of the protective custody placement within seven (7) days. A document review is conducted every seven (7) days thereafter for 60 days. After the initial 60 days the offender is reviewed every 30 days to determine if there is a continuing need for separation of the offender from general population.

There have been no offenders placed in protective custody during this audit period.

Compliance Determined by:

Safe Prison/PREA Plan  
Administrative Segregation Plan  
Interview with the unit warden

### **Standard 115.51 Inmate reporting**

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

Offenders may report sexual abuse, sexual harassment, extortion, violence or retaliation to any correctional staff, facility administrators, Safe Prison/PREA Management Office, through a third party, the grievance procedure, or anonymously. Reporting information is available to the offender in the Offender Handbook, PREA pamphlets, signage throughout the facility and posting in the entrance to each housing area. In addition, this information is provided through the PREA video which is shown to the general population monthly.

Board policy 3.91, Uniform Correspondence Rules and the Texas Board of Criminal Justice PREA brochure state that correspondence sent to the Office of the Inspector General or the PREA Ombudsman is considered special correspondence and may be sealed by the offender. The office of the Inspector General and the PREA Ombudsman report to the Board of Criminal Justice and are considered an independent entity. Writing supplies and postage is provided for indigent offenders. Interviews with offenders supported compliance with this standard.

Staff accepts reports from offenders verbally, in writing, anonymously, and through a third party. Staff report that verbal reports are documented immediately. Staff is able to privately report to the Office of the Inspector General and the PREA Ombudsman. Most staff felt they could make private

reports to the facility administration as well.

Compliance Determined by:

Interviews with random staff and offenders

Interview with the unit warden

Board policy, 3.91, Uniform Correspondence Rules

TBCJ PREA brochure

Administrative Directive 14.09, Postage and Correspondence Supplies

Executive Directive 2.10 Prison Rape Elimination Act Complaints and Inquiries

Safe Prison PREA Plan

### **Standard 115.52 Exhaustion of administrative remedies**

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

Board Policy 3.77, Offender Grievances, establishes the grievance procedure for offenders.

Administrative Directive 03.82, Management of Offender Grievances, establishes procedures for the handling of grievance filed by offenders.

The Safe Prison/PREA Plan requires that a time limit will not be imposed for grievances which allege sexual abuse. Offenders are not required to utilize the informal grievance process prior to filing a formal grievance. The Safe Prison PREA Plan establishes time limits for grievances related to sexual abuse. These time limits are consistent with the requirements of this standard. The OGOM 4.0, Grievance Time Limits, requires that all grievances will be completed within 40 days. Grievances related to sexual abuse are considered emergency grievances and must be completed within 40 days. Extensions for these grievances are not allowed. The time limit does not include the time period in which the offender is preparing an appeal. If the offender does not receive a response to a grievance within the allotted time period, the offender may consider the absence of a response to be a denial at that level. The plan states that offenders who allege sexual abuse may submit a grievance to someone other than the staff member who is the subject of the grievance. The plan also prohibits the referral of the grievance to a staff member who is the subject of the sexual abuse grievance.

If the grievance alleges imminent sexual abuse, the grievance is forwarded to a level of review for immediate corrective action. An initial response will be rendered within 48 hours of receipt and a filing decision within five working days. The initial response and the final response will document whether the offender is in substantial risk of imminent harm and the action taken.

The Safe Prison PREA Manual and the Offender Grievance Operations Manual state that third parties can assist an offender in filing a grievance related to sexual abuse or may file a grievance on behalf of an offender for allegations of sexual abuse, sexual contact or sexual assault. Third parties include fellow offenders, staff members, family members, attorneys or advocates. The named offender will be informed of the grievance and given the opportunity to accept or decline to have the grievance investigated. If the offender chooses to have the matter investigated, the offender is required to complete a grievance form. The offender's decision is documented on the Third Party Preliminary Investigation form.

The Safe Prison Plan requires that the grieving offender will not be disciplined for filing a grievance related to sexual abuse unless the grievance was filed in bad faith. There were two grievances alleging sexual abuse within this audit period.

Compliance Determined by:

Board Policy 3.77, Offender Grievances  
Administrative Directive 03.82, Management of Offender Grievances  
Safe Prison/PREA Plan  
OGOM 4.0, Grievance Time Limits

**Standard 115.53 Inmate access to outside confidential support services**

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

The TDCJ has not been able to obtain an MOU for the Hightower Unit with rape crisis center. The names, addresses, and phone numbers of rape crisis centers in Texas are posted in the law library for access by offenders. Offenders can correspond with these crisis centers by having a third party call or write the crisis center or the offender can correspond with the rape crisis center through the PREA Ombudsman. Correspondence with the PREA Ombudsman is considered special correspondence. Special correspondence is sealed by the offender and uninspected. The PREA Ombudsman will forward the correspondence between the offender and the rape crisis center. The rape crisis center is not obligated to report the abuse.

The agency has made considerable efforts to obtain Memorandums of Understanding with rape crisis centers across the state. William Stephens, Correctional Institutions Division Director and agency PREA Coordinator sent solicitation letters to all rape crisis centers throughout Texas that are affiliated with the Texas Association Against Sexual Assault. The agency PREA Manager recently attended the March 2016 Texas Association of Sexual Assault conference. The Agency PREA Manager provided an informational seminar regarding the scope of MOU's with the TDCJ, handling of offender reports and the like, in an effort to encourage rape crisis centers to consider entering into an MOU with the TDCJ.

Due to the limited response from the rape crisis centers, the TDCJ developed a training program to train selected employees as Offender Victim Representatives. Staff is trained to provide victim support for offenders who have been victims of sexual assault. The OVR provides support through the forensic exam and investigatory interviews. The Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative, outlines the selection, training and duties of the Offender Victim Representative.

Compliance Determined by:

Safe Prison/PREA Plan  
Board Policy 3.91, Uniform Offender Correspondence Rules  
Observations during the facility tour  
Interviews with offenders, staff, and regional PREA Manager  
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries  
Listing of Rape Crisis Centers within the state  
Solicitation Letter

MOU Example from another unit  
Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative

**Standard 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)

Third parties can contact the PREA Ombudsman or the Office of the Inspector General to report sexual abuse or harassment. The agency website provides an on-line brochure entitled, General Information Guide for Families of Offenders. The address, phone number and email address for the PREA Ombudsman is available in this on-line brochure. Information regarding the Office of the Inspector General is also available on the agency website and includes contact information. PREA informational postings which include reporting options are posted in the visitation area as well.

Executive Directive 02.03, Ombudsman Program, outlines the duties of the Ombudsman. Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries, provides guidance in reporting to the Ombudsman’s office for offenders, outside agencies, and third parties.

Compliance Determined by:

Executive Directive 02.03, Ombudsman Program  
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries  
On-line Brochure, General Information Guide for Families of Offenders  
Postings throughout the facility  
Safe Prison/PREA Plan

**Standard 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 Safe Prison/PREA Plan and Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General, requires all staff to immediately report any knowledge, suspicions, or information regarding sexual assault, sexual harassment, retaliation against staff or offenders for reporting, and any neglect on the part of staff that may have contributed to an incident or sexual abuse or harassment or retaliation on any unit whether or not it is a TDCJ facility. All such reports are forwarded to facility investigators and/or OIG investigators.

The Safe Prison/PREA Plan also prohibits staff from revealing any information regarding a sexual abuse report to anyone other than a supervisor or officials and only to the extent necessary to make informed treatment, investigative, security, or management decisions.

Correctional Managed Health Care Policy G-57.1, Sexual Assault/Sexual Abuse, requires health care staff to notify the security supervisor and physician/mid-level practitioner of any offender complaints

of sexual abuse/assault. Interviews with medical and mental health staff confirm that offenders are informed of the practitioner's duty to report and the limits of confidentiality at the initiation of services.

Compliance Determined by:

Safe Prison/PREA Plan

Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General  
Correctional Managed Health Care Policy G-57.1, Sexual Assault/Sexual Abuse  
Interviews with random staff, medical and mental health providers

**Standard 115.62 Agency protection duties**

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

The Safe Prison PREA Operations Manual requires the first security officer to learn of an alleged sexual abuse to immediately separate the victim from the alleged abuser. All staff interviewed understood their responsibility to protect victims by separating the victim from the alleged abuser. Security staff is provided a pocket guide that outlines the appropriate steps to take if they receive a report of sexual abuse. There were two incidents in which it was determined that the offender was at substantial risk of imminent sexual abuse. Staff responded immediately to protect the offenders.

Compliance Determined by:

Safe Prison PREA Operations Manual

Interviews with random staff, first responders, unit warden

**Standard 115.63 Reporting to other confinement facilities**

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

The Safe Prison/PREA Operations Manual requires that the Unit Safe Prison/PREA Manager will notify the Safe Prison/PREA Management Office (SPPMO) immediately upon receiving a report of sexual abuse that occurred in another agency. The SPPMO will notify the facility head or appropriate office of the agency in which the sexual abuse allegedly occurred as soon as possible, but no later than 72 hours after receiving the report and document this notification. There was one incident during this audit period in which the facility received a report of sexual abuse occurring at another facility.

The Safe Prison/PREA Operational Manual requires that upon receiving notification from another agency that an offender reported sexual abuse while in a TDCJ facility, the facility warden will be notified. The warden will notify OIG and the PREA Ombudsman immediately. There were two incidents of sexual abuse received from other facilities. Each incident reported to the Hightower Unit

was investigated.

Compliance Determined by:

Safe Prison/PREA Operations Manual 4.01, Reporting Incidents of Sexual Abuse to Other Confinement Agencies  
Safe Prison/PREA Operations Manual 4.02, Receiving Allegations of Sexual Abuse from an Outside Agency  
Interview with Unit Warden

**Standard 115.64 Staff first responder duties**

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

The Safe Prison/PREA Operational Manual 05.01, Sexual Abuse Response and Investigation, requires the first security officer to receive notification of an alleged sexual abuse to immediately separate the victim from the alleged abuser. The security supervisor will conduct an initial interview to determine the nature of the abuse, the date, time, location of the incident and the identity of the assailant. If the abuse occurred within 96 hours of the allegation, the victim and alleged abuser is advised not to brush teeth, change clothing, wash, urinate or defecate, smoke, drink or eat. The security supervisor will contact OIG, the duty warden, highest ranking security supervisor, medical and mental health staff, the Offender Victim Representative, the emergency action center and the unit Safe Prison/PREA Manager. OIG determines if the victim needs a forensic exam, provides instruction for crime scene preservation and whether the alleged abuser should be placed in a dry cell to preserve evidence.

Administrative Directive 16.03, Evidence Handling provides comprehensive instructions for evidence handling and crime scene preservation in the event a criminal act is committed on TDCJ property. First Responder duties are also summarized on a pocket size card provided to security staff. First responders, investigative staff, and random staff were interviewed and were aware of their responsibilities.

There were nine (9) incidents in which an allegation of sexual abuse was received. Of the nine (9) allegations, there were seven (7) incidents in which the first responding security officer separated the victim from the alleged abuser. On one (1) occasion the alleged incident occurred within a time period that allowed for the collection of evidence but the victim refused a forensic exam.

The TDCJ Correctional Institutions Division Safe Prison/PREA Plan requires that if the first staff responder is not a correctional officer, the responder shall monitor the victim to ensure physical evidence is not destroyed and shall immediately notify a correctional officer. There were three incidents during this audit period in which the first person to receive a report of sexual abuse, was not a correctional officer. In each incident the staff member instructed the victim not to take steps and notified security staff.

Compliance Determined by:

Administrative Directive 16.03, Evidence Handling  
Interviews with random staff, first responders, and investigators  
Safe Prison/PREA Operational Manual 05.01, Sexual Abuse Response and Investigation

Review of investigations

**Standard 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)

The Safe Prison/PREA Operational Manual outlines the agency plan for a coordinated response to allegations of sexual abuse. The plan addresses the roles and duties of first responders, medical and mental health practitioners, security supervisors, investigators and leadership. The specific responsibilities for each department are outlined in separated policies i.e. medical and mental health response is outlined in the healthcare policy, investigators duties in OIG policies.

Interviews with security, mental health, medical staff, investigators, and leadership supported compliance with this standard.

Compliance Determined by:

Safe Prison/PREA Operational Manual

Safe Prison/PREA Plan

Interviews with security, mental health, medical staff, investigators, and persons in leadership roles

**Standard 115.66 Preservation of ability to protect inmates from contact with abusers**

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

This standard does not apply because the Texas Department of Criminal Justice does not have collective bargaining agreements. The agency has the authority to remove any employee alleged to have committed an act of sexual abuse from contact with offenders during the investigation process.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees  
Texas Attorney General Webpage

**Standard 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)

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees mandates that retaliation will not be tolerated. Rule 20 addresses violations of statutory authority, court order, rules, regulations and policies. Rule 22a addresses harassing or retaliation against another individual. Both rules are level 2 offenses. Disciplinary action for these offenses include probation up to nine (9) months, withdrawal of pay increases, suspension without pay up to twenty work days, reduction in pay, involuntary demotion, and or dismissal.

Three staff are designated at the Hightower Unit to monitor retaliation: Brittany McShan, Unit Security Threat Group Officer (Security Threat Group department) , Joshua Santiago, Unit Safe Prison/PREA manager, (Safe Prison Department) and Maricia Jackson, Warden (Administration). The warden is responsible for monitoring staff, the Unit Safe Prison/PREA Manager and Unit Security Threat Group Officer is responsible for monitoring offenders.

The Safe Prison/PREA Operations Manual 2.4 Intervention Practices allows for housing and work assignment changes, or facility changes for victims or abusers, or administrative segregation for abusers. This provides protection for the victim and limits further abuse of offenders. Assignment to safe keeping or protective custody is also utilized for victims. Careful consideration is given prior to assignment to either status. Staff may be separated by shift, facility, position change or termination.

The Safe Prison/PREA Operations Manual 5.08, Ninety-day Monitoring for Retaliation, requires the facility warden and the Unit Safe Prison PREA Unit Manager to monitor offenders or staff who have reported a sexual abuse or sexual harassment for a minimum of ninety days or witnesses to the abuse. Monitoring shall be continued beyond the initial ninety days on a case-by-case basis. Monitoring includes a review of disciplinary reports, housing or program changes, and negative performance evaluations, reassignment of staff. Monitoring is terminated if the agency determines the allegation is unfounded.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees  
Safe Prison/PREA Operations Manual 2.4 Intervention Practices  
Safe Prison/PREA Operations Manual 5.08, Ninety-day Monitoring for Retaliation  
Interview with William Stephens, Director of Correctional Institution Division and agency PREA Coordinator  
Interviews with staff charged with monitoring retaliation  
Interview with an offender who reported a sexual abuse

**Standard 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)

The Safe Prison PREA Plan mandates that offenders who are at risk of sexual victimization will not be placed in protective custody unless an assessment of all available alternatives have been made and it is determined there is no alternative means of separation available to protect the offender from likely abusers. If an offender is placed in involuntary housing, the offender is reviewed every seven (7) days for the first sixty days and every thirty days thereafter. There were no offenders held in involuntary segregated housing during this audit period.

Compliance Determined by:

Safe Prison PREA Plan  
Guidelines for Administrative Segregation Committee Members

**Standard 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)

Board policy 1.07, Inspector General Policy Statement authorizes the Office of the Attorney General to conduct independent investigations within the TDCJ. The inspector general reports to the Board of Criminal Justice through the board chair. The Office of the Inspector General conducts all investigations in which a crime may have been committed. The facility investigators conduct administrative investigations.

The Safe Prison PREA Plan states investigations of sexual abuse and sexual harassment will be conducted promptly, thoroughly and objectively for all allegations to include third-party and anonymous reports. Investigators are required to complete specialized training in conducting sexual abuse investigations in a correctional setting. The training curriculum for course 3201, Sexual Abuse Investigations was reviewed. This class is required for OIG investigators. In addition, the training curriculum, Safe Prisons PREA Investigation Training – Conducting a Thorough Investigation was also reviewed. This training course is required for administrative investigators at the facility level.

Board policy 01.07, Inspector General Policy Statement authorizes the Office of the Inspector General to conduct investigations in the TDCJ. The Inspector General reports to the Board Chair.

The Office of Inspector General 2015 Operations Manual OIG 04.05, Offender Sexual Assault Investigations, outlines the agency policy and procedures for conducting sexual assault investigating and documenting the investigation. The policy provides specific instructions for gathering DNA evidence and determining if a forensic exam is indicated.

The OIG investigator consults with the prosecuting attorney if necessary before conducting compelled interviews if it is suspected that the compelled interview may be an obstacle for criminal prosecution. The credibility of a witness is determined on an individual basis and is not determined by the person's status as offender or staff. Offenders reporting sexual abuse are not required to submit to a polygraph or other truth telling device as a condition to proceed with the investigation. Criminal investigations are documented and include a thorough description of physical, testimonial, and documentary evidence and copies of all documentary evidence when feasible. A review of investigation reports support compliance with this standard.

OIG 3.72, Records Retention – PREA states that all criminal and administrative investigations of sexual assault related offenses will be retained for as long as the alleged abuser(s) is incarcerated plus five years and as long as the staff is employed plus five years. Prior to destruction of the records, the Records Supervisor must confirm that the offender is no longer incarcerated or staff member is no longer employed and that five years has passed since the release or termination.

The Safe Prison PREA Plan requires that the departure of the alleged assailant or victim from employment or custody of the TDCJ shall not be the basis for terminating an investigation.

Compliance Determined by:

Board policy 01.07, Inspector General Policy Statement  
Safe Prison PREA Plan  
Safe Prison Operations Manual  
OIG 3.72, Records Retention – PREA  
OIG 04.05, Offender Sexual Assault Investigations  
Interviews with investigators

**Standard 115.72 Evidentiary standard for administrative investigations**

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

The Safe Prison PREA Plan requires that no standard higher than the preponderance of the evidence will be imposed in determining if sexual abuse or sexual harassment occurred. The curriculum for Conducting a Thorough Investigation was reviewed and addresses this provision. Training records and interviews with investigators supported compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan  
Curriculum – Conducting a Thorough Investigation  
Training Records – Investigators  
Interviews with Investigators

**Standard 115.73 Reporting to inmates**

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

The Safe Prison PREA Plan requires that offenders who have made sexual abuse allegations will be informed by the Unit Classification Committee if the allegations were found to be substantiated, unsubstantiated, or unfounded. The facility provided an example of this notification form, which is in English and Spanish.

If the alleged abuser was staff, the warden is charged with informing the offender if the staff is no longer assigned to the facility or if the staff is no longer working for TDCJ. If the abuse was determined to be criminal, the Safe Prison PREA Management Office informs the offender if the staff is indicted and if the staff is convicted of the sexual abuse at the facility.

If the alleged abuser is an offender, the Safe Prison PREA Management Office will inform the victim if

the abuser is indicted and if the abuser is convicted of the sexual abuse at the facility.

All required notifications are documented. Investigation files were reviewed and contained copies of notifications. The duty to provide notifications terminates if the offender is no longer in TDCJ custody.

Compliance Determined by:

Offender Notification Brochure  
Safe Prison PREA Plan  
Investigation files  
Interviews with Unit Safe Prison Manager, Warden, investigators

**Standard 115.76 Disciplinary sanctions for staff**

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

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees states the sexual misconduct with an offender is considered a level one offense and dismissal is the only recommendation allowed. Only the Executive Director, deputy executive director or appropriate division director is allowed to impose a less severe disciplinary action. This directive also addresses harassment and retaliation. These violations may be considered level one or level two offenses. When imposing sanctions, consideration is given to the circumstance and nature of the offense, past history, sanctions for comparable offenses. There have been no incidents of staff violating sexual abuse or sexual harassment rules during this audit period. The contractor is responsible for notifying licensing bodies of any terminations for violations of sexual abuse or sexual harassment policies or resignations by staff who would have been terminated if not for their resignation.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees  
Discussions with Regional Safe Prison PREA Manager

**Standard 115.77 Corrective action for contractors and volunteers**

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

The Volunteer Services Plan clearly states that agency's policy of zero tolerance, explanation of prohibited behaviors and the consequences for engaging in these behaviors. The plan clearly states that violators will not be allowed to continue to volunteer with the TDCJ and may face criminal prosecution. The Safe Prison PREA Plan also states that volunteers or contractors who engage in sexual abuse will also be reported to relevant licensing bodies. This plan states that the units are to take appropriate remedial measures and shall consider whether to prohibit further contact with

offenders, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by a contractor or volunteer. The training and orientation provided for contractors and volunteers and interviews with volunteers and contractors confirm compliance with this standard. During this audit period, there were no incidents of volunteers or contractors reported to law enforcement agencies for engaging in sexual abuse of an offender.

Compliance Determined by:

Volunteer Services Plan  
Safe Prison PREA Plan  
Acknowledgment of Volunteer Training/Orientation form  
Volunteer Training Facilitators Guide

### **Standard 115.78 Disciplinary sanctions for inmates**

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

The Safe Prison PREA Plan requires that offenders should face disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse, sexual harassment, extortion, substantiated acts of violence or following a criminal finding of offender on offender sexual abuse. Sanctions should be appropriate to the nature of abuse committed, the offender's disciplinary history, and sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process will consider whether an offender's mental disabilities or mental illness contributed to his behavior when considering what sanction, if any, should be imposed. Consensual sex between offenders is a violation of agency rules and may result in disciplinary sanctions. Offenders may be disciplined for sexual contact with staff if there is a finding that the staff did not consent. If the offender makes a report of sexual abuse in good faith, upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying even if the investigation finds the allegations could not be substantiated for the purpose of disciplinary action. During this audit period there have been no administrative or criminal findings of offender-on-offender sexual abuse at the Hightower Unit.

The facility provides therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, if the offender is willing to participate in the treatment but the offender is not denied access to programs or other benefits for refusing to participate in the treatment offered.

Compliance Determined by:

Safe Prison PREA Plan  
Interviews with mental health staff

### **Standard 115.81 Medical and mental health screenings; history of sexual abuse**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that offenders are offered a referral to a medical or mental health practitioner if the screening tool indicates the offender has experienced prior victimization in an institutional setting or in the community. The offender must be seen within 14 days of the intake screening. All offenders who disclosed prior victimization during the risk screening were offered a follow-up meeting with a medical or mental health practitioner. The risk screening tool complies with this policy, notes the date of the referral, and requires the interviewer to attach the completed mental health referral form.

The plan also states that if the screening indicates the offender has previously perpetrated sexual abuse, in an institutional setting or the community, the offender is offered a referral to a medical or mental health practitioner. A review of the screening tool indicates that offenders who have previously perpetrated sexual abuse are referred to the mental health department. As noted above, the risk screening requires the date of the referral and a copy of the referral to be attached to the screening form. The PAQ stated that all offenders who previous perpetrated a sexual abuse were offered a follow-up meeting with medical or mental health staff. A sample of referrals and mental health follow-up was reviewed. The mental health department provided services to the referred offender within the 14 day time period. Interviews with staff who conduct the risk screening and mental health staff supports compliance with this standard.

Information concerning sexual victimization or abusiveness is limited to medical and mental health staff except for staff as needed for housing, work, education, and program assignments. If the offender reports a prior sexual victimization that did not occur in an institutional setting, the mental health staff obtains informed consent before reporting this information.

Compliance Determined by:

Safe Prison PREA Plan  
Offender Assessment Screening form  
Mental Health Outpatient Clinic Notes  
CMHC I-70.1, Informed Consent  
Interview with Healthcare staff  
Interview with staff completing risk screening

### **Standard 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 Safe Prison Operations Manual and CMHC G-57.1, Sexual Assault-Sexual Abuse, require that an offender, who reports sexual abuse or assault will immediately be evaluated, examined and referred for required services. The nature and scope of services are provided according the professional judgement of the medical and mental health practitioner. After hours, a tele-med system is utilized for accessing health care professionals. Forensic examinations, if indicated, are provided at a local hospital. Sexual assault victims are offered prophylactic treatment of venereal disease. For HIV or Hepatitis B exposure, education and testing is scheduled. When indicated prophylactic treatment is offered.

First responders interviewed were aware of their responsibility to protect the offender and to seek medical care. Staff was aware of how to use the tele-med equipment. Offenders are not charged for these services or denied services if they refuse to name the abuser or cooperate with the investigation.

Compliance Determined by:

Safe Prison Operations Manual  
CMHC G-57.1, Sexual Assault-Sexual Abuse  
Interviews with medical, mental health staff and first responders

**Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers**

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

The Safe Prison PREA Plan requires that offenders who have been victimized by sexual abuse in any prison, jail, lock-up, or juvenile facility will be offered medical and mental health evaluation and treatment, as appropriate. These services include treatment plans, follow-up services and referrals for continued care upon transfer to other units or release from custody. Victims of sexual abuse during incarceration are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided without cost to the offender, regardless of whether the victim names the abuser or cooperates with the investigation. A mental health evaluate of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse. Treatment is offered when appropriate in accordance with CMHC policies.

Review of policies and interviews with medical and mental health staff indicates the care is consistent with or exceeds the community level of care.

Compliance Determined by:

Safe Prison PREA Plan  
CMHC E-32.1, Receiving, Transfer and Continuity of Care Screening  
CMHC E 44.1, Continuity of Care  
Interviews with medical and mental health staff

**Standard 115.86 Sexual abuse incident reviews**

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

The Safe Prison PREA Plan requires units to conduct incident reviews for all allegations of sexual abuse and staff sexual harassment, unless the allegation was determined to be unfounded. All incidents are report to the Emergency Action Center. The warden is required to conduct the incident review and forward the completed report to the regional director, PFCMOD deputy director or department head within 10 working days of the notification to the Emergency Action Center, for

additional comments. If there are no recommendations or corrective action, the report and all attachments are sent to the EOC within 20 days of the notification to the EOC. The EOC maintains all agency incident reviews in accordance with the records retention policy.

If the report contains recommendations or corrective actions require a written 90-day follow-up report prepared by the regional director, PFCMOD deputy director or department head. The completed report must be submitted to the deputy director of prison and jail operations, or the PFCMOD division director and the appropriate division director or designee within 90-days of the notification to the Emergency Action Center.

The review team must include upper-level management with input from security supervisors, investigators, and medical and mental health practitioners. The incident reviews are conducted in accordance with Administrative Directive 02.15, Operations of the EAC and Reporting Procedures for Serious or Unusual Incidents. The review must include: a review of the circumstances of the incident; events leading up to and following the incident; consideration as to whether the actions taken were consistent with TDCJ policies and procedures; a review of whether lesser alternative means of managing the situation were available; identification of the actions, if any, that could be taken to avoid future incidents of a similar nature; identification of training needs; a determination of whether Incident Command System levels or response levels were used during the incident; a determination as to whether an employee action or inaction was a factor; corrective action taken.

There were eight incident reviews completed during this audit period. Each review was completed within the required 30-day period. A review of incident review reports for the investigations during this audit period included: consideration as to whether the allegation or investigation indicated a need to change policy; whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status, gang affiliation, or otherwise caused by other group dynamics at the facility; an inspection of the area was completed and addressed whether there were physical barriers in the area abled abuse; staffing levels were assessed; the adequacy of monitoring technology in the area. It is recommended that the agency consider amending the policy to include all requirements of 115.86 d. although each of these areas is adequately addressed in the incident review report.

Compliance Determined by:

Safe Prison PREA Plan

Interviews with Incident Review Team members

Administrative Directive 02.15, Operations of the EAC and Reporting Procedures for Serious or Unusual Incidents

Review of Incident Review Reports

### **Standard 115.87 Data collection**

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

The Emergency Action Center is responsible for receiving reports of all serious or unusual incidents, reporting this information to designated administrators, providing a monthly report and providing Executive services with the information necessary to prepare statistical reports. This information is also provided to the Safe Prison PREA Operations Office. The Safe Prison/PREA Operations office enters the information into the Safe Prisons Sexual Assault database. This office receives a monthly

report from each unit (private facilities are included) and compiles this information as well as the EOC data, and information received from OIG. This data is analyzed and evaluated for trends in sexual abuse, sexual harassment and extortion. This office identifies trends in time of day, locations, and demographics, related to sexual abuse victims and assailants, and custody class. A monthly report is sent to the Correctional Institutions Division directors. The agency provided the 2014 Survey of Sexual Violence for review.

Compliance Determined by:

Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents  
Safe Prison/PREA Operations Manual 01.01, Safe Prisons/PREA Management Office  
Survey of Sexual Violence, 2014  
Safe Prison/PREA Plan

**Standard 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 agency provided the Safe Prisons Program report for the 2013 fiscal year. The reports include data collected and aggregated in order to assess and improve the effectiveness of its Safe Prisons/PREA Plan. The report is comprehensive to include the identification of problem areas, on-going corrective action, and includes information by facility as well as the agency as a whole. The report includes comparison of the current data and corrective actions with prior years and provides an overall assessment of the agency's progress in addressing sexual abuse. The report is available on the agency website.

Compliance Determined by:

Safe Prisons/PREA Annual Report  
Agency website

**Standard 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 Safe Prison PREA Plan requires that all data collected shall be maintained for at least ten (10) years after the date of the initial collection, unless federal, state, or local law requires otherwise. The Records Retention Schedule was reviewed and is consistent with this policy.

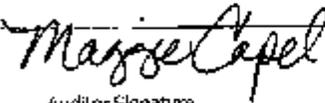
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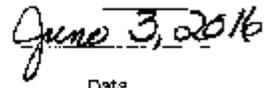
Safe Prison/PREA Plan  
Records Retention Schedule

**AUDITOR CERTIFICATION**

I certify that:

- X The contents of this report are accurate to the best of my knowledge.
- X No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- X I have not included in the final report any personally identifiable information (PII) about any offender or staff member, except where the names of administrative personnel are specifically requested in the report template.

  
\_\_\_\_\_  
Auditor Signature

  
\_\_\_\_\_  
Date