

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: August 17, 2016

Auditor Information			
Auditor name: James Curington			
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Email: jecjrboy@aol.com			
Telephone number: 352-538-2636			
Date of facility visit: July, 18-22, 2016			
Facility Information			
Facility name: Rogelio Sanchez State Jail			
Facility physical address: 3901 State Jail Road, El Paso, TX 79938-8456			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: 915-856-0046 (**108)			
The facility is:	<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		
Facility type:	<input checked="" type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Garth Parker			
Number of staff assigned to the facility in the last 12 months: 287			
Designed facility capacity: 1,100			
Current population of facility: 961 (7/22/2016 last day of the on-site visit)			
Facility security levels/inmate custody levels: J1 – J5, Ungraded; G1 - G4, Transient			
Age range of the population: 18 – 75 years			
Name of PREA Compliance Manager: Leonardo Jaquez		Title: Unit Safe Prisons PREA Manager	
Email address: Leonardo.jaquez@tdcj.texas.gov		Telephone number: 915-856-0046 ext.8321	
Agency Information			
Name of agency: Texas Department of Criminal Justice			
Governing authority or parent agency: <i>(if applicable)</i> State of Texas			
Physical address: 861-B I-45 N, Huntsville, TX 77320			
Mailing address: <i>(if different from above)</i> PO Box 99, Huntsville, TX 77342			
Telephone number: 936-295-6371			
Agency Chief Executive Officer			
Name: Brad Livingston		Title: Executive Director	
Email address: Brad.livingston@tdcj.texas.gov		Telephone number: 936-437-2101	
Agency-Wide PREA Coordinator			
Name: Lori Davis		Title: Director, Correctional Institutions Division	
Email address: Lori.davis@tdcj.texas.gov		Telephone number: 936-437-2170	

AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (PREA) Audit for the Texas Department of Criminal Justice (TDCJ) Rogelio Sanchez State Jail, Region IV, Correctional Institutions Division (CID) began with notification and assignment of the certified PREA auditor, James Curington, by the American Correctional Association (ACA), in May 2016. This report dated August 17, 2016 is a Final Report, developed by the auditor under the guidance/training by the National Prison Rape Elimination Act Resource Center (PRC).

The methodology of the auditor was to use a step-by-step process which included: 1) sending a Pre-Audit Report form to the PRC; 2) making contacts with the Agency/Facility, the posting of audit notices, and sending an Agenda for the site visit; 3) obtaining a flash drive with information, documents, the Facility Pre-Audit Questionnaire, etc. from the Agency/Facility and carefully reviewing such prior to the site visit; 4) making a site visit to the community and the facility to be audited; 5) making an assessment of compliance/noncompliance during and after the site visit with follow-up review of documents and materials; 6) completing a interim/final Auditor Summary Report; 7) notifying the Agency/Facility of the summary report; and 8) sending a Post Audit Report, with the Final Audit Report attached, to the PRC. The Prison Rape Elimination Act, the 43 standards, and the evaluation instrument was used to assess and complete the audit report.

The auditor used the PREA Audit Instrument, Adult Prisons and Jails supplied by the PRC, through its website, to conduct the Sanchez State Jail audit. The Audit Instrument and its seven sections, A-G, is detailed as follows: A) the Pre-Audit Questionnaire, B) the Auditor's Compliance Tool, C) Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor's Summary, F) the Process Map, and G) the Checklist of Documentation. Again, this instrument was used as the basis for the auditor's assessment process, and was also used by the Agency/Facility to help prepare for this audit.

After the notifications, contact information, posting of notices, completion of the pre-audit form, agency disclosure forms, receipt of information referencing the facility, and agenda for this site visit; the auditor began to review the Agency and Facility information. A wealth of information was contained in the flash drive. The Pre-Audit Questionnaire, a master folder file addressing all 43 PREA standards and supporting documents for the Agency and the Sanchez Unit, were all enclosed. The auditor thanks the Agency and the Sanchez Unit staff for this compilation of Unit and Agency information to assist in assessing PREA compliance for the facility. This material was thoroughly reviewed prior to the on-site visit. Special attention was paid to supporting documents including policies and laws from the Texas Government Code, the Texas Board of Criminal Justice (TBCJ), the Texas Department of Criminal Justice (TDCJ), the Correctional Institutions Division (CID), the Texas Tech (TT) University and its correctional managed healthcare responsibility, staffing/rosters of the facility, inmate rosters/housing; schematics/layouts of the facility; all which were extremely helpful in understanding and reviewing the Facility for PREA compliance.

The PREA auditor submitted a written daily agenda to the facility and the TDCJ Central Office prior to the on-site visit. The audit agenda was as follows:

Sunday, July 17

Introductions/meet and greet – facility staff and auditors for ACA and PREA audits meet and discuss agenda
Pre-Audit Meetings as appropriate
ACA audit and PREA audit, Dual Audit Discussion (ACA audit Mon. – Wed., PREA audit Wed – Fri.)

Monday, Tuesday and Wednesday morning, July 18, 19, and 20 morning – ACA audit

The ACA Audit Process, including: Transportation; Entrance Interview; Facility Tour; Conditions of Confinement/Quality of Life; the Examination of Records; including Litigation, Significant Incidents/Outcome Measures, Departmental Visits, Shifts; Status of Standards/Plans of Action; and ACA wrap up, including, the Compliance Tally and Exit Discussion will be coordinated by the ACA Chairperson.

Wednesday continuation, July 20 – PREA Audit/PREA Agenda

ACA Closeout and Summary

1:00 p.m. – The PREA auditor will discuss the Audit Instrument by the PREA Resource Center including: 1) the Pre-Audit Questionnaire, 2) the Auditor Compliance Tool, 3) the Instructions for the PREA Audit Tour, 4) the Interview Protocols, 5) the Auditor's Summary Report, 6) the Process Map, 7) the Checklist of Documentation.

Attend Shift Briefings – Post Assignments – Afternoon, Evening

Schedule interviews with staff and inmates (facility staff assistance). This may be done on Monday or Tuesday.

Tour facility (lists of where, who and when). Note: PREA "Instructions for PREA Audit Tour". This is follow-up and a revisit to areas as needed from ACA audit tour.

Review PREA standards/justifications

Review Demographics of the facility with Sanchez Unit staff helping provide the following: Capacity designated, Actual capacity: first and last day of the audit, Age Range/Youthful Offenders, Gender, Security Custody Levels, Number of staff: total, security, non-security, program, medical, contract, volunteers, other.

Review facility schematics with Sanchez Unit staff helping provide the following: # of buildings, # of dorms, # of acres (inside, outside the compound), # of towers, fence (kind, height, length, security features, etc.)

Review Allegations (sexual abuse, harassment, retaliation: investigated – administrative, criminal, indicted, prosecuted, referred; founded, unfounded, substantiated, unsubstantiated

Interviews with staff and inmates. Note: PREA "Interview Protocols" i) Agency Head, ii) Warden, iii) PREA Compliance Manager/Coordinator, iv) Specialized Staff, v) Random Staff, vi) Inmates

View/Review Offender Orientation/Admission

Thursday, July 21

8:00 a.m. Visit and revisit institutional operational areas. Review specialty areas.

3:00 p.m. Review PREA standards for compliance/information

Review Safety, Security, Healthcare – local hospital, EMS, sexual abuse crisis support, local Mental Health (24/7 access to emergency medical/mental health care, and providers).

Interviews with staff and inmates. Note: PREA "Interview Protocols" Make sure interviews include all staff "shifts". Make sure inmates from each housing unit are interviewed.

Friday, July 22

Follow up on PREA standards compliance and facility information needed and appropriate to the PREA Auditor's Summary Report.

9:00 a.m. Tour with the Warden and the Institutional PREA Compliance Manager

11:00 a.m. Review Auditor's Summary procedures (interim report/final report) with key staff

12:00 noon depart the Sanchez Unit

Agenda for the PREA site visit is flexible and tentative. The goal is a thorough, comprehensive, professional and expert PREA audit review in conjunction with the facility staff and inmates, and supporting TDCJ staff.

The above agenda was accomplished, and the touring, visiting, and revisiting of departments and operations, assisted the auditor in understanding the operations of the facility and its efforts to obtain PREA compliance.

Informal interviews and scheduling of formal interviews over the three days of the PREA audit assisted with the understanding of the facility, its operations, and with the review of the 43 PREA standards. There were 13 formal interviews with random staff, and 18 formal interviews with specialized staff. Numerous informal interviews were also accomplished with staff. There were 27 formal interviews with inmates, and additionally, many informal interviews were also conducted with the inmate population. Inmates from every housing unit/area were interviewed.

The final day had an informal standards review, and a discussion with the auditor and key staff members, including the Warden and the Assistant Warden and the PREA Compliance Manager to indicate that a report would be completed within 30 days. The auditor indicated that he would take materials and information back in conjunction with the on-site visit and assess compliance or noncompliance for each standard. At this time on this final day and after a week at the facility, there were no red flags indicating noncompliance of any PREA standards. As of the writing of this report, August 17, 2016, this is a Final Report and the Rogelio Sanchez Unit meets or exceeds standards in all material ways for this initial PREA audit review. Please see the Summary of Audit Findings for the specific compliance tabulation.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Rogelio Sanchez State Jail Unit is a 1100 bed, male, correctional facility located at 3901 State Jail Rd., El Paso, TX 79938. The facility opened in 1996 and is a medium, minimum custody prison that receives inmates from 20 counties in West Texas. The facility houses Jail inmates and Institutional Division inmates up to two years in primarily minimum and medium custody status with an average length of stay of 18 months or less (310 days per the Pre-Audit Questionnaire). The audit welcome book designated 976 inmates as minimum custody and 18 inmates as medium custody. Also, according to the audit welcome book, the average daily population for the past 12 months was 972 and the current unit population was 961 as of 7/22/201, the last day of the audit.

The facility was named after Rogelio Sanchez, a former teacher and County Commissioner who worked closely with County judges and the criminal justice system during his political career to improve living standards and conditions of the people of El Paso and the community he served for 36 years.

The facility itself is situated on approximately 102 acres of land consisting of 10 buildings within a perimeter road, 8/10 of a mile square, patrolled by an armed perimeter vehicle, and surrounded by chain-link fencing with razor ribbon. (Please see the following aerial photo provided). There are five housing units with 20 living areas of 50 beds in each area. There is one faith based housing area of 50 inmates and 30 single cells and 14 multiple occupancy cells for short-term holding and segregation. The inmate population houses, medium and minimum custody level inmates classified as mostly J1-J2 which are jail inmates (JI inmates) and mostly G1, G2, and transient inmates of the Correctional Institutional Division (ID inmates). Departments at the facility include: the armory, chaplaincy services, classification/count rooms/records, commissary, community service, operational review, personnel, recreation, training and field training, reentry, risk management, Safe Prisons/PREA, security threat group, unit supply, offender property, laundry, K-9, food service, intake, maintenance, healthcare services, unit transport, field squads, and offender grievance.

Medical is described by the Unit Directory as ambulatory, medical and dental services. Telemedicine services are available and all services are on a single level managed by Texas Tech University contract medical healthcare. There is no infirmary but there is a clinic with sick call request, a pill window, and walk-ins are allowed with after hour inmate care triaged by on-call medical and health care staff utilizing the digital medical system. When inmates need emergency medical care, "staff will call EMS without delay.". EMS care is provided by El Paso emergency medical/fire services.

Inmate work programs are provided for the inmate population, excluding those in admission, intake and orientation. The work program assignments include food service/kitchen (178); janitors and orderlies (121); shower/restroom/supplementary janitorial squad (112); field squad (95); laundry and clothing (63); trade/vocational maintenance (34); supplemental building maintenance (28); landscape gardeners (10); and numerous smaller squads to include animal caretakers, barbers, commissary workers, tractor operators, unit artists, and others.

The Sanchez Unit offers educational/vocational programs, under the direction of the Agency Windham School District, to include General Equivalency Diploma (GED), pre-GED, Adult Basic Education programs (ABE); literacy programs, English as a Second Language program (ESL), vocational programs and social learning skill programs, such as Cognitive Intervention, and Changes. The Unit has a computerized law library and a educational/recreational library that offers over 5500 books with daily newspapers and 20 magazines subscriptions, all of which come under the auspices of the Windham School District. Additional programs are described as the Life Decisions Program, Reentry Planning, Chaplaincy Services, Community Tours, Crime Stoppers, and GO KIDS Initiative.

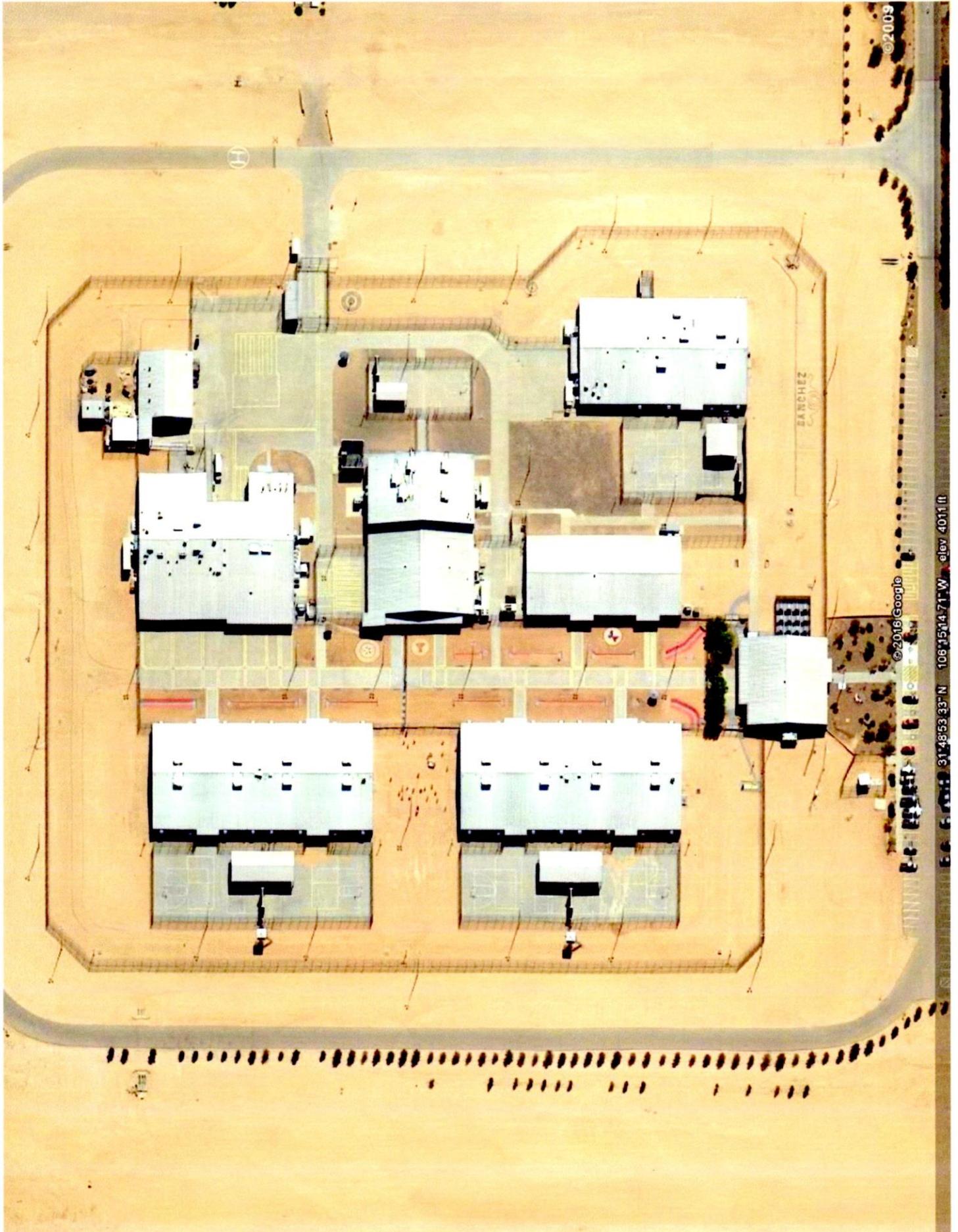
The Sanchez State Jail has an active community service program consisting of inmate labor squads assigned to the Department of Texas Parks and Wildlife, the Texas Department of Transportation, the area school districts, city and county agencies including the neighboring Sheriff's office, and individual inmate assignments to the Department of Public Safety and to the Texas A&M Agri-Life Facility.

Volunteer initiatives include Substance Abuse Education, Life Skills, Support Groups, religious/faith-based studies and activities.

***Rogelio Sanchez State Jail
Texas Department of Criminal Justice
Region IV Correctional Institutions***



The degree of excellence and professionalism that permeates throughout the Rogelio Sanchez State Jail is a direct result of the staff's dedication, individual acceptance of responsibility and desire to be here.



The Mission Statement is quoted as follows:

"The mission of the Rogelio Sanchez State Jail is to enhance public safety by providing cost-effective supervision for criminal offenders in a secure environment. To promote positive change in offender behavior, through the use of coordinated programs of education, vocational training and community service work, substance abuse service and religious programs."

The Sanchez Sate Jail is an ACA Accredited Facility since January 2002. The facility has recently been recommended by a reviewing audit team of July 2016 for reaccreditation to the American Correctional Association Commission on Accreditation.

Facility demographics:

Designated facility capacity: 1100 (from website Unit Directory/Information and Institutional audit welcome book).

Actual capacity: 961 (from count sheet, last day of the PREA audit 07/22/2016).

Age range of population: 18-75 (from Institutional audit welcome book, no youthful population.)

Gender: male.

Average length of stay: 310 days (from Pre-Audit Questionnaire, dated 06/28/2016).

Custody grades - inmates in that grade: G1 - 0, G2 - 726, G4 - 7, G5 - 0; J1 - 40, J2 - 152, J4 - 7, J5 - 4, not rated NR&SR 25, (this on grade scales G1 to G5 and J1 to J5, 1 being the lowest/minimum custody and five being the highest/close/maximum custody).

Total employees: 287; Security employees-207, Non-Security employees-52, Windham Education employees-13. Healthcare employees-15 (from the website Unit Directory/Information)

SUMMARY OF AUDIT FINDINGS

The Rogelio Sanchez State Jail, was assessed as "In Compliance" with the PREA standards in this is a Final Report.

As listed below of the 43 standards, 37 were assessed as meeting substantial compliance in all material ways with the standard for the relevant review period. (Please note that, in PREA auditor Training at the ACA Boston, Massachusetts 2016 conference, standards that did not apply such as 115.12 Contracting with Other Entities, where there are no contracts with other entities; 115.14 Youthful Offenders, where there are no youthful offenders; and standard 115.66 Preservation of Ability to Protect Inmates from Contact with Abusers, when there are no collective bargaining agreements; such standards were described as meeting the standard and to be marked as "meet standards"). Also, six standards were assessed as substantially exceeding the requirements of the standard (115.11 Zero Tolerance; 115.31 Employee Training; 115.33 Inmate Education; 115.35 Specialized Training- Medical and Mental Healthcare; 115.41 Screening for Risk of Victimization and Abusiveness; and 115.51 Inmate Reporting).

Number of standards exceeded: 6

Number of standards met: 37

Number of standards not met: 0

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

The Safe Prisons/PREA Plan established by the Texas Department of Criminal Justice and dated August 2014 was established to prevent, detect, and respond to sexual abuse and sexual harassment in the TDCJ. This plan has been disseminated throughout the agency stipulating for all its facilities, "A zero tolerance for all forms of sexual abuse and sexual harassment of offenders." The Rogelio Sanchez Unit adheres to and practices this zero tolerance plan as observed through the documents, the tour, the postings at the facility, and verified by numerous discussions with staff, inmates, visitors and volunteers.

In addition to establishing the zero tolerance for sexual abuse and sexual harassment of offenders mentioned above, the PREA Plan and the Safe Prisons/PREA Operational Manual (SPPOM) require that the Agency "be vigilant in establishing a safe environment for staff and offenders at all, secure correctional facilities and take immediate actions to address the protective needs of offenders who have been victimized.... The TDCJ Safe Prisons/PREA Plan shall be applicable to all individuals, including visitors and volunteers employed by, under contract with, or supervised by the TDCJ, including professional staff and any person who is involved, directly or indirectly with the care and custody of offenders."

The Safe Prisons/PREA Plan through the SPPOM, specifically addresses the following issues: 1) administration of the plan; 2) intervention; 3) assessment and screening; 4) reporting and receiving allegations; 5) investigation; 6) training; 7) grids, codes, files and transfers; 8) reporting; and, 9) 22 attachments which include checklists, reports, information templates, and supporting information. The manual clearly assists in establishing and ensuring zero tolerance of sexual abuse and sexual harassment throughout the TDCJ and at the Sanchez Unit. The plan and manual also addresses definitions of prohibited behaviors and sanctions for those prohibited behaviors. Also addressed are strategies and responses to help prevent and reduce sexual abuse and sexual harassment.

The staff at the Sanchez State Jail exhibited knowledge and practice of the zero tolerance policy of sexual abuse and sexual harassment as noted when the auditor made his site visit, toured the facility, and interviewed formally and informally many of the persons mentioned in the first paragraph.

The TDCJ has designated Ms. Lori Davis, as Director of the Correctional Institution Division (CID), to address the scripted PREA questions for the Agency Head. The auditor received written responses to the questions from Ms. Davis and the Central Office of TDCJ. Ms. Davis has also been appointed as the agency PREA Coordinator. Ms. Davis responded with written responses to the Agency PREA Coordinator questions, including the question that the Coordinator has enough time and authority to develop, implement and oversee the Agency's efforts to comply with PREA standards. Ms. Davis' position in the Agency Organizational charts is noted by the auditor.

The Sanchez Unit has appointed Mr. Leonardo Jaquez, at the facility, as the PREA Compliance Manager who reports directly to the Warden. This is noted in the Institutional Organizational Chart. The facility PREA Compliance Manager has enough authority and time to coordinate the Facility's efforts to comply with the PREA standards. This was directly observed by the auditor.

After review of the documents submitted by the Facility, including the Safe Prisons/PREA Plan, the SPPOM, the Agency and Facility Organizational Charts, and interviews with staff, inmates, volunteers and others, this standard, 115.11 for zero tolerance for sexual abuse and sexual harassment was found to "exceed" standards by the PREA, DOJ certified auditor.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

TDCJ, Sanchez State Jail Unit does not contract with other entities for confinement of inmates. Thus, this standard is not applicable, and is found to meet standards as directed by the training received August 6, 2016 by the PREA Resource Center (PRC) staff at the PREA training given at the annual American Correctional Association (ACA) conference, Boston, Massachusetts 2016.

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 Sanchez State Jail Unit has a design capacity of 1100 bed for inmates of minimum, medium custody with appropriate staffing. The facility's physical design and security is appropriate to supervise and monitor the inmate population. The facility has a staffing plan which is annually reviewed to evaluate whether or not the institution can meet and perform its duties and responsibilities. The Warden, the Human Resource Department, and key staff were interviewed to assess the adequacy of the staffing plan, the recruitment policy/practices, the institutional needs, and the duties/responsibilities of the Security Department to assess compliance with this standard. Although more staff is always desirable, the auditor was assured that the facility was meeting its needs, performing its responsibilities, and completing its duties of supervision and monitoring on all shifts 24/7.

Administrative and higher-level staff conduct unannounced rounds to identify any deviation from the staffing plan and procedures. They perform unannounced rounds to continually check safety and security of the inmates and the staff's compliance with the PREA standards. In addition to unannounced rounds, the Security Operations Manual and the Post Orders for the Security Department addressed supervision and monitoring duties. Staff compliance with post orders is also documented and maintained through incident reviews, logs, reports, operational count sheets, security training practices, and direct supervision by "walking and talking".

The minimum staffing pattern is signed and approved by the Warden. All deviations, compliant and noncompliant sheets and all count sheets are reviewed daily by administrative and upper level staff. Deviation is noted and approved by the Chief of Security and the Warden.

Video cameras are strategically located throughout the Unit both externally and internally. Cameras are appropriately monitored and recordings are made consistent with policy. Staff routinely checks for blind spots, which are evaluated, secured and appropriately monitored, through constant review of sightlines, mirrors, the staffing, and video enhancement.

Based on the specialized staff interviews, including the intermediate and upper level staff, the facility tour, including observation of the security operations, the video review, the review of officer post orders, logs, staff rounds, and the Annual Staffing Plan, the auditor assesses compliance with this standard.

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)

TDCJ Sanchez State Jail Unit does not house any inmates under the age of 18. There are no youthful offender inmates at the Sanchez Unit. Thus, this non-applicability is found to meet standards as directed in the PREA training by the PRC Staff at the annual ACA conference at Boston, Massachusetts 2016.

Standard 115.15 Limits to cross-gender viewing and searches

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

The Sanchez Unit conducts searches according to the TDCJ Safe Prisons/PREA Plan, the Safe Prisons/PREA Operational Manual and the Administrative Directive-03.22 Offender Searches. The Plan and the Manual stipulate that no cross gender viewing or cross gender searches are conducted except in exigent circumstances. Policy AD-03.22 Offender Searches, directs that "staff of the same gender shall conduct strip searches unless extraordinary circumstances exist,". Post Orders also refer to searches and procedures. The auditor reviewed the policies and the post orders and noted and observed, while touring the facility, strip searches of inmates and pat-down searches of inmates which were all performed by staff of the same gender. It is noted in the Pre-Audit Questionnaire that two strip searches or visual body cavity searches were made by nonmedical staff that were cross gender strip or cross gender visual body cavity searches. This was discussed with the Warden and key staff. It was determined that these were in error, they were documented and better communications has been established to outline exigent circumstances.

There are no female offenders at the Sanchez Unit. Thus, there are no cross gender pat-down searches of female inmates at the Sanchez Unit.

Staff is trained on searches of inmates, including transgender and intersex inmates. 100% of all search security staff have received training on conducting cross gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security. It was this auditor's assessment based on observation of the actual searches and interviews held with staff and inmates that this facility is in compliance with cross gender viewing and searches.

All cross gender strip searches and cross gender visual body cavity searches are documented as required by policy.

The Safe Prisons/PREA Plan and the Administrative Directive 03.22 Offender Searches direct that staff of the opposite gender announce their presence when entering an inmate housing unit and ensure that inmates can shower, perform bodily functions, and change clothing without staff of the opposite gender viewing breast, buttocks, and/or genitalia, except in exigent circumstances or when the viewing is incidental to routine self checks. The auditor observed the announcements made by staff members of the opposite sex when entering each housing unit.

Based on the policies mentioned above, and the observation of cross gender searches and searches made at the facility during the on-site visit and most importantly, based on staff and inmate interviews and the observation of the daily operations of the facility, the auditor assesses this standard as compliant.

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 Sanchez Unit through the TDCJ Administrative Directives, AD-04.25 Language Assistance, AD-06.25 Qualified Interpreter Services; through Corrections Medical HealthCare policies, CMHC G 51.1 Offenders with Special Needs, and CMHC G 51.5 Certified American Sign Language Services; and through its Safe Prisons/PREA Operations Manual, has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the Agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The auditor reviewed, with the intake staff, the policy on inmates with special needs and it was clear that the contracted healthcare staff from Texas Tech University, the PREA Coordinator, and facility staff, make an extra effort to assist in ensuring that PREA information is extended to every inmate, including those with disabilities and those who are limited English proficient.

Much PREA information is distributed to inmates through peer education and peer mentoring. Inmates who were charged with this responsibility were interviewed and related that the Sanchez Unit was meeting their responsibility in disseminating the appropriate PREA information.

There are numerous certified interpreters at the Sanchez Unit. Moreover, it was observed by the auditor that many of the staff were eloquently bilingual with either El Paso or Juarez as home. The use of inmate interpreters is prohibited except in limited circumstances where an extended delay in obtaining staff could compromise an inmate's safety. It is seldom that inmates are used as interpreters or assistants and in the past 12 months, there have been no times, zero number of instances where an interpreter was used in a PREA circumstance.

Based on interviews with staff and inmates, the tour, including review of intake, and orientation, and review of the policies and procedures, the auditor assesses this standard compliant with PREA standards.

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)

Hiring and promotion decisions in standard 115.17 contains eight subsections outlining the importance of thorough background checks, and the vetting of staff and new employees, contractors, and volunteers who have contact with inmates. The auditor spent time with the Human Resource staff, reviewing personnel policy, procedures, employment applications, supplemental applications, background checks, and PREA concerns and expectations established by PREA.

It was clear, to the auditor, that the TDCJ Human Resource Policy in conjunction with the Texas Government Code on employment, that the Sanchez State Jail prohibits hiring and promoting anyone who has contact with inmates who has engaged in sexual abuse in prison or was convicted of engaging in or attempting to engage in sexual activity by force in the community or who has civilly or administratively been adjudicated to have engaged in sexual activity by force. The Agency and the Sanchez Unit also require consideration of any incidences of sexual harassment in determining whether to hire or promote someone. Specifically, the auditor lists the following Personnel Directives (PD):

1) PD 22 general rules of conduct

- 2) PD 27 employee status
- 3) PD 29 sexual misconduct
- 4) PD 56 request for release of information
- 5) PD 71 selection system procedure
- 6) PD 73 selection criteria
- 7) PD 75 pending charges

These policies, plus the Safe Prisons/PREA Plan, the Personnel forms, and the Texas Code were all reviewed by the auditor.

Background checks are conducted on all newly hired or serious applicants. In the past 12 months there have been only six, employees hired at the Sanchez Unit, as most employees transfer to the Sanchez Unit from outlying and remote institutions. These record checks are conducted and completed by the Human Resources Headquarters in Huntsville, Texas, at the TDCJ Central Personnel Office. Notifications of completed background checks are then sent to the facilities with a notice of clearance to hire. Background checks are also completed before enlisting the services of any contractor who has contact with inmates. These communications and notices were reviewed by the auditor.

The Agency policy also requires that background checks are conducted at least every five years for current employees and contractors who have contact with inmates. This is also done through an automatic central system at the Headquarters in Huntsville, Texas.

Personnel policy, and the Code of Ethics is important to the TDCJ, and it is noted by the auditor that material omissions regarding any misconduct or the provision of material false information submitted to the TDCJ are in and of themselves grounds for termination.

Based on the auditor's interviews with the Warden and the Human Resource Manager, based on the review of qualifications and applications, and based on the review of the policy and procedures, this standard is assessed as compliant.

Standard 115.18 Upgrades to facilities and technologies

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

According to the Pre-Audit Questionnaire, the Sanchez Unit has not made any substantial expansions or modifications of existing facilities since August 20, 2012.

The facility has updated its video monitoring system, electronic surveillance system, or other monitoring technology since August 12, 2012 and the auditor reviewed the Security Operations Procedures Manual (SOPM) section on the security surveillance system. The manual is quoted as follows: "prior to the new installation of equipment, the surveillance systems coordinator will coordinate with the agency Safe Prisons/PREA Compliance Manager to collect any relevant information concerning the operations and will deploy the surveillance equipment in an effort to enhance the agency's ability to protect the offender's from sexual abuse". The auditor also reviewed Security Memorandum-01.14 that states that video surveillance will be used to "protect the offender against assault, extortion and sexual abuse, in accordance with the TDCJ Safe Prisons/PREA Plan". The Sanchez Unit camera listing and placement was reviewed by the auditor.

The auditor also observed, during the tour, central camera monitoring, and all areas of the facility, blind spots, and certain sensitive security locations.

Based on the auditor's review of the facility with the Warden, and the Chief of Security, the areas mentioned above, the camera operation, and based on interviews with supervisory staff, and random security staff from each shift, this standard is assessed as PREA compliant.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Evidence protocol and forensic examinations are addressed by the TDCJ in its Safe Prisons/PREA Plan and Operational Manual (SPPOM).

The TDCJ is responsible for administrative and criminal sexual abuse investigations. Investigations of sexual abuse and sexual harassment at the Sanchez Unit are covered by TDCJ policy.

Forensic examinations of sexual abuse are addressed and covered by TDCJ policy for its institutions, including the Sanchez Unit. Forensic examinations are accomplished by an outside local community facility/hospital.

The Safe Prisons/PREA Operations Manual sections 02.02 and 05.01; the Administrative Directive, AD-16.03 Evidence Handling; the Correctional Managed HealthCare policy, CMHC G-57.1 Sexual Assault/Sexual Abuse; the Agency Rape Crisis Center template letter; and supporting documentation for this standard were all reviewed by the auditor. In addition, the auditor visited the local hospital (University Medical Center of El Paso, a Level 1 Trauma Hospital) for forensic examinations and met with the lead SAFE/SANE nurse at the hospital and later met with the Director at the Rape Crisis Center (Center Against Sexual and Family Violence-CASFV, 24 hour hotline 915-593-7300). Victim advocates are made available by the phone through the Rape Crisis Center, or in person by specially trained Offender Victim Representatives (OVRs) from the Sanchez Unit.

The auditor was very impressed with the communications between the Sanchez Unit and the Rape Crisis Center and the hospital. It is noted that both the Rape Crisis Center and the SAFE/SANE nurse actually hold classes for the health services staff and victim offender support staff from the facility.

The Safe Prisons/PREA Operations Manual assures investigators will follow a uniform protocol through the use of operational policy and the Sexual Abuse Checklist directed for investigation of all allegations.

The Corrections Managed HealthCare policy stipulates that appropriate forensic medical examinations, which are accomplished at the local hospital, are completed by the hospital and also directs that SAFE/SANE administer the examinations. There have been zero number of forensic medical exams in the past 12 months.

Based on interviews with the SAFE/SANE nurse, the Rape Crisis Center staff, investigators of the Office of the Inspector General (OIG), investigators at the facility, the Institutional PREA Compliance Manager, and the Warden, (and, of course, review of the documentation) the auditor finds this standard in compliance.

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)

The following policies ensure referrals of allegations for investigation: Administrative Directive, AD-02.15 Operations of the Emergency Action Center (EAC) and AD-16.20 Reporting Procedures to the Office of the Inspector General (OIG); Board Policy, BP-01.07, Inspector General Policy Statement; the Safe Prisons/PREA Operational Manual, sections of 5.01, Sexual

Abuse Response and Investigation, and 05.05 Offender Protection Investigation; the OIG Manual section 04.05 Offender Sexual Assault; Safe Prisons/PREA Plan; and the Personnel Directive PD-29, Sexual Misconduct. These policies along with supporting procedures, checklists and actual investigations were reviewed by the auditor.

Specifically, the policies AD-02.15, and AD-16.20, outline the necessity and immediacy of reporting incidents and crimes to the EAC and the OIG. The Safe Prisons/PREA Plan and the SPPOM also outlined the sexual abuse investigative procedure, and the protective investigative process (Offender Protection Investigation-OPI), which explain and outline, for the inmates in orientation, the specifics concerning prevention, detection and reporting of sexual abuse and sexual harassment.

The Office of Inspector General policy 04.05 and the Texas Board of Criminal Justice policy dictate requirements and referrals for investigation to those with legal authority to conduct criminal investigations. These criminal investigations are documented.

There are trained Institutional Investigators and OIG Investigators assigned to cover all allegations of sexual abuse at the Sanchez Unit.

Interviews with investigative staff, random staff and inmates indicate knowledge and familiarity with policies and procedures. Pocket information cards are distributed to staff and outline procedures to assist with reporting abuse and establishing the basis for an investigation. In the past 12 months there have been zero number of sexual abuse and sexual harassment allegations received at the Sanchez Unit. These facts and numbers are reported in the Pre-Audit Questionnaire and were reviewed by the auditor with the Warden and the PREA Compliance Manager

The auditor assesses compliance based on the review of the policies and supporting documentation, as well as interviews with specialized staff and a random sampling of inmates.

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 auditor was impressed with the Safe Prisons/PREA Plan of the TDCJ, and its zero tolerance policy, which was found to exceed compliance in standard 115.11 and in this standard, Employee Training, because of the knowledge of staff and practice of the staff to prevent, detect and respond to sexual abuse and sexual harassment, this standard, 115.31, was also found to exceed standards compliance. As mentioned, staff are knowledgeable about the zero tolerance policy and they are knowledgeable on how to perform their duties and responsibilities in detecting sexual abuse, reporting of sexual abuse, and responding to sexual abuse. Staff have received pocket guidelines outlining TDCJ's Mission Statement, the Officers Code of Ethics, PREA information, first responder duties to sexual abuse, and supplemental information concerning the care and control of the inmate population. It is noted how professional and serious each staff member was to their jobs/post assignments. It was also noted that the Warden's leadership concerning custody, care and control was reflected by the staff in the daily performance of institutional operations. All staff formally interviewed, and informally interviewed about their duties and responsibilities were professional, knowledgeable and eager to answer questions and to share their insights into the facility/Sanchez Unit.

Without exception, every formal interview revealed the staff's knowledge and training about the following 10 subsections:

- 1) the agency zero-tolerance policy
- 2) how to fulfill their responsibilities regarding PREA
- 3) the right of inmates to be free from sexual abuse and sexual harassment
- 4) the right of inmates and staff to be free from retaliation for reporting
- 5) the dynamics of sexual abuse in confinement
- 6) the common reactions of sexual abuse in victims
- 7) how to detect signs of sexual abuse

- 8) how to avoid inappropriate relationships with inmates
- 9) how to communicate effectively and professionally
- 10) how to comply with the laws for mandatory reporting

The responses, and information provided to these topics verified the staffs training and experience.

Training is tailored to the gender of the inmates at the Sanchez Unit (an all-male facility). The training is documented and staff confirm that they understand the training they have received.

Based on the administrative policies of the TDCJ, the attendance at shift briefings/turnouts where training was observed firsthand, review of the training curriculum, and interviews with staff, both formal and informal, this standard is assessed as "exceeds standards".

Standard 115.32 Volunteer and contractor training

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

All volunteers and contractors who have contact with inmates have been trained in their responsibility under the TDCJ policies, including procedures regarding sexual abuse/sexual harassment prevention, detection, and response.

The emphasis on volunteer training can be recognized through the efforts made by the TDCJ in establishing a Volunteer Service Plan (VSP), a handbook for volunteers which is available on the public website, and a special training video to help educate the volunteers who assist the Texas Department of Criminal Justice.

The volunteer program is administered through the TDCJ Headquarters in Huntsville, Texas. There are over 22,000 volunteers who have been trained. Volunteers are certified by the TDCJ.

Contractors who have contact with inmates are trained, reviewed, and vetted at the local level by the Human Resources Department at the units with appropriate background checks made through the TDCJ. There are 22 contractors who have contact with inmates, who work at the Sanchez Unit and have been trained in agency policies regarding sexual abuse and sexual harassment. The auditor is especially impressed with the Code of Conduct training that is extended to volunteers and contractors in their curriculum.

The auditor had an opportunity to meet with and speak with several contractors and volunteers during the on-site visit. Each volunteer and contractor were trained and knowledgeable about PREA.

Based on the auditor's interviews with staff, volunteers, contractors, and inmates, as well as review of the policy and procedures concerning volunteers and contractor training this standard was found in compliance.

Standard 115.33 Inmate education

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

Admission and orientation was observed, the inmate handbook was reviewed and interviews were conducted with random inmates and staff, which revealed that inmates receive training and information about the zero tolerance policy and how to report instances or suspicions of sexual abuse and harassment.

Moreover, the PREA Compliance Manager meets with all newly received and admitted inmates and assists intake with the assessment, orientation, and education of the inmates admitted to the Sanchez Unit. This practice, and the attentive individualized treatment of each and every inmate that is received, as observed by the auditor, raises the level of compliance of this standard to an "exceeds".

Most especially, a small handout recommending "Make the Call 24 hour crisis hotline 915-593-7300/800-727-0511...linea de crisis 24-horas icomunicate! www.casfv.org" is handed out to inmates in orientation extending the message to report, to make the call, if one is been, or is sexually abused or harassed. This small handout and the rape crisis center handout, as well as the information extended by the Peer-Educators/Mentors who help distribute information and show the inmate video concerning PREA, supports an exceeds standard assessment.

The effective training by peer educators with inmates newly received at the Sanchez unit was observed by the auditor. The auditor further interviewed several peer educators/mentors obtaining very positive information about the PREA program at the facility. Inmate PREA education is available in different formats to accommodate all inmates. The education of the inmates takes into account physical and mental health care of the inmate as well as limited English proficiency, Spanish-language handbooks, posters, and information were noted throughout the facility. Inmate information and education is documented for each individual inmate. This standard was found as exceeds compliance based on the auditor's review of the intake procedures, the passionate involvement of key staff including the PREA Compliance Manager, the inmate peer educators and based on interviews formally and informally with inmates.

Standard 115.34 Specialized training: Investigations

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

The Agency's training policy, along with training curriculum and personnel policy, requires investigators to be trained in conducting sexual abuse investigations in confinement settings. The Texas Board of Criminal Justice policy BP 01.07 further states, as part of its general policy, that investigators are trained for "the highest level of investigative services for the TBCJ, TDCJ, and the citizens of Texas".

Investigators at the institutional level are specifically trained in the Offender Protection Investigations (OPI), relevant to PREA. Administrative training is further outlined in the Safe Prisons/PREA Plan sections Investigation Training, Correctional Training, and Specialized Investigations; in addition to the Administrative Directive, AD-16.03 Evidence Handling also assist in investigative training.

Criminal investigation is supplemented with further training for investigators through the Office of the Inspector General, outlined by policies, OIG-02.15 Training Procedures, and OIG-04.05 Offender Sexual Assault of Investigations, and through the National Institute of Corrections (NIC) PREA training. The Office of the Inspector General also conducts specialized training as outlined in the OIG Operational Manual. The Office of the Inspector General has 141 investigators for criminal investigations of which two are regionally assigned with the Sanchez Unit under their purview. There are 19 specially trained investigators for administrative investigations, offender protection investigations, and the initial findings, at the Sanchez unit. (The number of investigators was taken from the Pre-Audit Questionnaire.)

All training is documented and maintained through training rosters, and through certificates earned by the investigators which were reviewed by the PREA auditor, and are maintained in staff personnel files.

Based on interviews with specialized staff, including the investigators, and review of files and documents, investigations, and policies, this standard is found in compliance.

Standard 115.35 Specialized training: Medical and mental health care

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

The Texas Tech University is the contractor for health services at the TDCJ Sanchez Unit, El Paso, Texas. From the first night at the audit pre-meeting with the Warden, the Regional Medical Doctor and the facility administrator/social worker/psychologist, to the final tour of the on-site visit, the auditor was impressed with the intake, and overall health care services at the facility. The professionalism displayed by health care staff, and the passion and interest of health care staff was visible to the auditor. There was a clear commitment to healthcare treatment of the inmate, and a clear commitment to preventing, detecting, and responding to sexual abuse and sexual harassment as outlined by the PREA law and by the TDCJ's Safe Prisons/PREA Plan. It was obvious to the auditor that there was considerable specialized training in addition to extensive medical/healthcare training for the contracted staff of Texas Tech University, and supplementary facility staff who work at and are stationed at the Sanchez Unit.

The auditor reviewed Correctional Managed Healthcare policies, CMHC C-25.1 Orientation, Training for Health Services; CMHC C-19.1 Continuing Education Staff Development, and CMHC G-57.1 Sexual Assault and Sexual Abuse, all directing specialized training for medical and mental health care staff. Medical and mental health care staff are tested on their PREA training.

Specialized training performed in conjunction with the Rape Crisis Center (Center Against Sexual and Family Violence) and the Sexual Assault Nurse Examiner S.A.N.E. Program from the University Medical Center, further emphasized the extensiveness and completeness of health care for inmates in prison. Practitioners at the Sanchez Unit do not conduct forensic medical exams. They are performed at the University Medical Center in El Paso. The auditor visited the hospital and the Rape Crisis Center and spoke to both the SANE program nurse examiner, and to one of the crisis center directors.

All medical and mental health care practitioners (100%) who work regularly at this facility have received training required by the Agency Policy and additional specialized training provided by the Sexual Assault Nurse Examiner S.A.N.E. Program. (Information provided by the Pre-Audit Questionnaire.)

Based on the auditor's observation of healthcare operations at the Sanchez Unit; based on the auditor's review of documents, policy, curriculum, special program outlines; based on the PREA testing of health care staff; and based on the interviews with the regional physician, specialized health care staff, the Warden and others, this standard is assessed as "exceeds compliance."

Standard 115.41 Screening for risk of victimization and abusiveness

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

Admission, orientation, intake for short-term jail inmates is accomplished at the Sanchez State Jail Unit. The Unit also houses Correctional Institutional Division (CID) ID inmates for not more than two years.

The auditor found this intake/reception process, at the Sanchez Unit sophisticated and of medium size. The number of inmates entering the facility (either through intake, or transfer) within the past 12 months, whose length of stay was for more than 72 hours and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility was 1553. Additionally, inmates entering the facility whose length of stay was for 30 days or more, were reassessed for sexual victimization or of being sexually abusive within 30 days after their arrival, the number reassessed was 91. This information obtained from the Pre-Audit Questionnaire. The intake process was observed in detail

and impressed the PREA auditor, such that a finding of "exceed standards" for this standard, Screening for Risk of Victimization and Abusiveness was assessed. It was observed that the Institutional PREA Compliance Manager, the Unit Classification Committee, the health care staff, the administrator/social worker/psychologist, the intake and classification staff, and key staff including the Warden are involved and work as a team to individually assess each inmate at the Sanchez Unit.

The Safe Prisons/PREA Operational Manual (SPPOM) and the Safe Prisons/PREA Plan address and outline the screening procedures for the risk of victimization and abusiveness. The manual and the plan were reviewed by the auditor before the on-site visit and included the review of the Offender Assessment Screening which addresses this critical (to security and safety) screening process. Each inmate assessment includes screening for risk of being sexually abused by other inmates or of being sexually abusive towards inmate. This intake assessment tool is an objective instrument that includes the following:

- 1) whether the inmate has a mental, physical, or developmental disability;
- 2) age of the inmate;
- 3) physical build of the inmate;
- 4) whether the inmate has previously been incarcerated;
- 5) whether the inmates criminal history is exclusively nonviolent;
- 6) whether the inmate has prior convictions for sex offenses against an adult or child;
- 7) whether the inmate is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- 8) whether the inmate has previously experienced sexual victimization;
- 9) the inmates own perception of vulnerability, and
- 10) whether the inmate is detained solely for civil immigration purposes. It is noted that no inmates were detained at the Sanchez Unit solely for immigration purposes.

It was also explained to the auditor that the Sanchez Unit reassesses each inmate who stays more than 30 days at the facility for risk of victimization or risk of abusiveness. This also complemented the exceeds assessment for this standard.

This standard is assessed as exceeds based on the auditor's interviews of intake and assessment staff, interviews with randomly selected inmates, observation of the intake and assessment process, the use of the TDCJ's assessment tools, the individualized thoroughness with which the inmates were evaluated, and the overall feeling and concern for a sense of safety and security for every staff member and every inmate.

Standard 115.42 Use of screening information

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

The use of screening information by the Unit Classification Committee (UCC) consistent with the direction of the Administrative Directive, AD 04.17 Offender Housing Assignment, Administrative Directive, AD 04.18 Offender Job Assignment, and Correctional Managed HealthCare policy, CMHC 35.1. Mental Health Appraisal for Incoming Offenders, CMHC G-51.11 Treatment of Inmates with Intersex Conditions of Gender Dysphoria, and consistent with the Safe Prisons/PREA Operational Manual and its assessment screening all direct the housing, bed, work, education, and program assignments for the inmates at the Sanchez Unit. This direction by the above policies insures special attention to the safety and security of inmates that are at high risk of being sexually victimized and it also extends to those inmates who may be sexually abusive the opportunities for treatment/care. Again, it is noted based on these policies and procedures, each risk assessment screening is made on an individual basis and is in the interest of the safety and security of the inmates and staff.

The Unit Classification Procedures Manual and the documents used in the assessment of inmates, in addition to the above policies and procedures were reviewed by the auditor. The auditor further reviewed the use of information obtained during the assessment process. The information was used professionally. The well-trained intake staff, health care staff, security staff, and all staff at the facility that have access to information practice confidentiality, and share such information on a need to know basis. The staff simply are very professional and discrete and attentive to their duties to disclose or keep information private according to policy and law in regard to the assessment process.

Based on the interviews with specialized staff, the review of the screening assessment process, and the documentation presented to the auditor this standard was found compliant.

Standard 115.43 Protective custody

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

The TDCJ has a policy, Safe Prisons/PREA Plan that, in conjunction with its companion Safe Prisons/PREA Operations Manual and the Agency's Administrative Segregation Plan, prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there are no available alternative means of separation from likely abusers.

In the past 12 months, there have been zero number of inmates at risk for sexual victimization who were held in involuntary segregated housing for 1 to 24 hours awaiting completion of assessment, there were zero number of inmates at risk for sexual victimization who were assigned to involuntary segregated housing for longer than 30 days, and there were zero number of inmates from the review of case files that were held in involuntary segregated housing that included statements of the facility's concern for the inmate or reasons why alternative means of separation could not be arranged. This information, and the number of inmates placed in involuntary segregation was taken from the Pre-Audit Questionnaire. Simply, there were zero number of inmates held in involuntary segregation for risk of victimization. It should be noted that this facility has a limited number of segregation cells (administrative and/or disciplinary), thus segregation cells are expertly and judiciously used only if necessary and only as outlined by policy and law.

Interviews with the Warden and specialized staff, including those that work in segregation, interviews with inmates, and inmates in segregation, confirm compliance with this standard. Based on the policy and procedures and the interviews, the standard was assessed as compliant.

Standard 115.51 Inmate reporting

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

Most impressive at the Sanchez Unit was staff and inmate knowledge of how to report sexual abuse or sexual harassment.

This standard, 115.51 Inmate Reporting and its subsections, a - d, addresses: a) multiple internal ways for inmates to report privately about sexual abuse and sexual harassment, b) at least one way for inmates to report sexual abuse and sexual harassment to a private or public entity or office that is not part of the Agency, c) staff accept reports, verbally or in writing, anonymously, and from third parties, and d) the Agency provides for a method for staff to report privately sexual abuse and sexual harassment of inmates. To accomplish the requirements of this standard, the Texas Board of Criminal Justice (TBCJ) has established an Ombudsman's Office, separate from the Texas Department of Criminal Justice (TDCJ) such that private reports can be made. Additionally, for the Sanchez Unit, hotline reporting can be made to the local rape crisis center, Center Against Sexual and Family Violence (CASFV) in El Paso, Texas. The auditors reviewed TBCJ and TDCJ the following policies and procedures that address reporting sexual abuse and sexual harassment: TBCJ Board Policy BP-03.91, Uniform Offender Correspondence Rules; TDCJ Executive Directive, ED 02.10, Prison Rape Elimination Act Complaints and Inquiries; the Safe Prisons/PREA Plan; the Office of the Inspector General PREA Ombudsman pamphlet; the zero-tolerance policy postings in the Sanchez Unit; the Offender Protection Information (OPI) reporting form; the inmate PREA video script that is shown to all inmates (English and Spanish versions); the staff training curriculum and PowerPoint information concerning reporting; and

information from the local rape crisis center, CASFV, and the University Medical Center of El Paso and its Sexual Assault Nurse Examiner, S.A.N.E. Program; all supporting an "exceeds" for this standard.

The TDCJ Executive Directive, ED 02.10, states "the Texas Board of Criminal Justice (TBCJ) established the PREA Ombudsman's Office to investigate and process PREA complaints and inquiries in accordance with the BP-02.10, Prison Rape Elimination Act Ombudsman's Policy statement. The Texas Department of Criminal Justice shall establish guidelines for reporting complaints or inquiries from elected officials, the public and offenders pertaining to allegations of sexual abuse and sexual harassment, and related TBCJ initiatives, to the PREA Ombudsman". The PREA Ombudsman's Office was established by the 80th Texas Legislature to serve as an independent office. The PREA Ombudsman reports directly to the Chairman of the TBCJ, and is an office external to the reporting process of the TDCJ and its Executive Director. Inmates can report privately to the PREA Ombudsman's Office.

The institutional inmate handbook and information distributed during intake, outlines ways for inmates to report sexual abuse or sexual harassment. Offenders may report allegations in many ways, verbally, in writing to departmental staff, including the Major, to the Office of the Inspector General, and to the PREA Ombudsman. Third parties, including fellow offenders, staff members, family members, attorneys, and advocates are permitted to assist offenders and request for administrative remedies regarding an allegation of sexual abuse. Reports to the PREA Ombudsman may be made confidentially through third parties. Reporting information is also available through information posted on bulletin boards, in the institutional libraries, on the public website, and from the staff at the Sanchez Unit.

The Inmate Peer Education Program conducted by inmates under the supervision of staff, addresses reporting sexual abuse and sexual harassment during inmate intake and orientation at the institution. The peer mentoring process includes PREA video sharing during the intake process and ways for inmates to report sexual abuse, harassment, retaliation, or staff neglect concerning PREA.

Based on interviews with staff and inmates, and based on the policies, procedures, and documents mentioned above, the auditor assesses this standard as exceeds standards compliance.

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)

The Texas Government Code section 493.014 and section 501.008 establish the offender grievance system for the TDCJ. The Texas Government Code and the TDCJ Administrative Directives, AD-03.77 Offender Grievances and AD-03.82 Management of Offender Grievances, and the TDCJ Offender Grievance Operational Manual outline the procedures for preparing, filing, and processing inmate grievances including inmate grievances concerning sexual abuse and sexual harassment.

The inmate grievance process is another way for inmates at the Sanchez Unit to report sexual abuse or sexual harassment. When utilizing the grievance procedure, the Sanchez Unit grievance staff will immediately telephone the highest-ranking security supervisor on duty to begin the steps of ensuring safety, evidence protection, notifications, and follow through. The TDCJ places great importance on its notification steps, as heard by the auditor during interviews, and observed by the auditor during the on-site reviews/tour.

In the past 12 months, there have been zero number of grievances filed at the Sanchez Unit that have alleged sexual abuse. Thus, there have been zero number of grievances that have reached a final decision within 90 days and there have been zero number of grievances that have required an extension if not reached in the 90 day time frame. The policy allows for these grievances and permits third-party assistance, including fellow inmates, staff members, family members and others to assist in filing administrative remedies. There have been zero number of grievances filed by inmates in the past 12 months in which an inmate has declined third-party assistance nor have emergency grievances been filed. Again, the grievance procedure has not been used to allege sexual abuse allegations at the Sanchez Unit. These numbers acquired from the Pre-Audit Questionnaire.

Based on the review of the grievance procedure, interviews with the Grievance Administrator, and interviews with staff and inmates, this standard is assessed as compliant.

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)

Inmate access to outside confidential support services and the three subsections a - c direct that: a) inmates will have access to outside victim advocates for emotional support services related to sexual abuse, toll-free numbers for local, state, or national victim advocacy groups in as confidential a manner as possible; b) the extent to which communications may be monitored by the facility; and c) the Unit makes attempts to enter into Memorandums of Understanding or other agreements with community service providers, with documentation of such attempts.

The Warden, the Institutional PREA Compliance Manager, and the auditor visited the University Medical Center of El Paso and spoke with the Sexual Assault Nurse Examiner S.A.N.E Program Director, and visited the Center Against Sexual and Family Violence (CASFV) the local rape crisis center. There is good communication between the Sanchez Unit and these support organizations. The nurse examiner has presented medical and rape crisis programs at the institution for key staff. The Rape Crisis Center has a "24 hour crisis hopeline and advocate hotline 915-593-7300" that is available. Pamphlets have been made available by both facilities.

The inmate handbook distributed during orientation/reception lists access to outside confidential support services. Additionally, materials in the institutional library list national, state and local resource centers for the inmates. Most importantly, local services are posted on inmate bulletin boards.

Inmate access to outside confidential support services is supported by the TDCJ through its Safe Prisons/PREA Plan and the plan states "offender shall be provided access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers, where available....The unit shall enable reasonable communication between offenders and those organizations and agencies in as confidential a manner as possible." Additionally, the Safe Prisons, PREA Operational Manual states "when an advocate, from the rape crisis center is not available to provide emotional support... The TDCJ shall upon request from the offender victim provide an Offender Victim Representative (OVR) to support the victim." It is noted anytime a forensic sexual abuse, medical exam is made by a SAFE or SANE practitioner at the local hospital, the Rape Crisis Center, is notified.

Based on the auditor's interviews with staff and inmates, with Offender Victim Representatives, the auditor's interviews with the Rape Crisis Center and hospital staff and the auditor's review of policy, procedure and supporting documentation, this standard is found in compliance.

Standard 115.54 Third-party reporting

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

The Texas Board of Criminal Justice (TBCJ) Ombudsman website provides a method to receive third-party reports of inmate sexual abuse or harassment.

Executive Directives ED-02.03 Ombudsman's Program and ED-02.10, PREA Complaints and Inquiries address information and procedures on how to report, to whom to report, and how to submit PREA complaints and inquiries. ED-02.10 Attachment A is PREA Audit Report

a PREA ombudsman inquiry response form containing a request for information, including the specific allegations, institutional actions, and additional pertinent information that can assist and does assist in reporting. The website and phone number of the PREA Ombudsman explained that there are resources on how to make third-party reports. The policy states "... The Texas Board of Criminal Justice established the Prison Rape Elimination Act Ombudsman's policy and office to investigate, process PREA complaints and inquiries.". The TBCJ website gives the name, mailing address, and phone number to be used for the purpose of directing inquiries and complaints to the PREA Ombudsman.

The TDCJ brochure titled "General Information Guide for Families of Offenders", outlines the mission of the TDCJ, and gives a brief description of the principle program areas for the family to review. The table of contents of the brochure has everything from intake to an institutional/unit directory that includes a section for the TBCJ, PREA Ombudsman and third-party reporting information.

The website, phone number, mailing address, pamphlets, posters, and handout information are ways in which information is distributed to the public.

The auditor reviewed the above documents, and interviewed formally and informally, staff and inmates, and assesses this standard as compliant based upon his review and interviews.

Standard 115.61 Staff and agency reporting duties

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

Reporting duties as defined in standard 115.61 are taken seriously by all staff that were interviewed formally and informally. Moreover, one's duty to report is required by law. At the Sanchez Unit, as with all other units in the TDCJ, all staff are required to report immediately and according to Agency policy, any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurs in the facility or another facility whether it is part of the Agency or not. All staff is also required to report retaliation against staff or inmate, to report sexual abuse or staff neglect, or violation of their responsibilities that may have contributed to retaliation. This is outlined in the TDCJ Safe Prisons/PREA Plan and its companion Safe Prisons/PREA Operational Manual. Staff is well aware of its "duty to report".

The duty to report is further outlined by TDCJ staff training curriculum and contract staff training curriculum, and through the policies and procedures, manuals and directives listed:

- 1) Personnel Directive-29, Sexual Misconduct with Offenders;
- 2) Safe Prisons/PREA Plan;
- 3) SPPOM-05.01, Sexual Abuse Response and Investigation;
- 4) Administrative Directive, AD-16.20 Reporting Incidents/Crimes to the Office of the Inspector General;
- 5) CMHC G-57.1 Sexual Assault/Sexual Abuse;
- 6) CMHC E-35.2 Mental Health Evaluation.

These policies and procedures, plan, directives, and manual, also prohibits staff from revealing information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, or other security and management decisions.

Interviews with staff, contractors, as well as the auditor's review of training records, training curriculum and supporting documents confirm this responsibility and duty to report. The auditor assesses this standard as compliant.

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)

When the Agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. The Safe Prisons/PREA Operational Manual and the Administrative Directive, AD-02.15 Operations of the Emergency Action Center (EAC) and Reporting Procedures for Serious and Unusual Incidents, outlines the action to be taken to assist and implement appropriate protective measures without reasonable delay.

The Sanchez Unit institutional staff are very knowledgeable and well-trained in their protection duties. Each staff member carries an information pocket card that assists in making sure their responsibilities are met when it comes to PREA. When an inmate is subject to imminent sexual abuse or risk of imminent sexual abuse, if known, the staff take procedures to protect the victim from the perpetrator/threat, make the appropriate notifications, and investigate and secure evidence. Protections are taken immediately. Interviews with staff, specialty staff, and review of training curriculum and records, confirmed this staff's knowledge and training.

In the past 12 months there have been zero number of times that the facility Sanchez Unit, has determined that an inmate was subject to a substantial risk of imminent sexual abuse. Informal and formal interviews with inmates confirmed a sense of safety and security, with the opportunity to solicit staff assistance when it comes to individual inmate's safety and security.

Based on the above policies, the Safe Prisons/PREA Plan, the SPPOM and interviews with staff and inmates, the auditor assesses compliance for this standard.

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 Prisons/PREA Operations Manual sections 04.01, 04.02, 05.01, and 05.05 and the Administrative Directive, AD-16.20 Reporting Incidents Crimes to the Inspector General establish and direct reports of sexual abuse to and from other confinement facilities. The policy indicates that the Warden "... will notify the head of the facility or appropriate office of the agency where the alleged incident occurred, as soon as possible, but no later than 72 hours after receiving the allegation". Further, if the TDCJ facility receives notification of an alleged sexual abuse, "the individual receiving such notification shall provide the notification to the unit Warden". Appropriate follow-up of these notifications are outlined in the SPPOM

During the past 12 months, the Sanchez Unit has received zero number of allegations that an inmate was abused while confined at another facility. Additionally, the Sanchez Unit has received zero number of allegations that an inmate was abused at the Sanchez Unit from another facility. This information is documented in the Pre-Audit Questionnaire.

The allegations/notifications of alleged sexual abuse, either to other confinement facilities or from other confinement facilities would be investigated and appropriate procedures followed as outlined and according to agency policy.

Based on the review of policies and procedures, information solicited at time of intake and admission, and interviews with staff and inmates support compliance for this standard. Based on such, the auditor assesses compliance.

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 TDCJ Safe Prisons/PREA Plan, Safe Prisons/PREA Operations Manual, and the Administrative Directive, AD-16.03 Evidence Handling and the Office of the Inspector General Operating Procedure Manual; detail the policy and procedures for the first responder to an allegation of sexual abuse.

The above-mentioned plan, outlines "response to reports of sexual abuse, after learning of an allegation that an offender was sexually abused, the first correctional officer responding to the report shall: a) notify security supervisor; b) separate the alleged victim and assailant; c) preserve and protect the crime scene, if applicable, appropriate steps can be taken to collect any evidence; d) monitor the alleged victim and alleged abuser to ensure physical evidence is not destroyed... If the first responder is not a correctional officer, the responder shall monitor the alleged victim to ensure physical evidence is not destroyed and shall immediately notify a correctional officer..."

The auditor reviewed training curriculum, documents, policies and procedures, the staff video presentation outlining first responder duties and responsibilities, the staff pocket card/instructions for PREA, and attended the shift briefing/turnouts where PREA issues were discussed, all supporting compliance with this standard.

In the past 12 months there have been zero number of allegations that an inmate was sexually abused at the Sanchez Unit.

Interviews with staff, volunteers, contractors, as well as the auditor's review of training records, training curriculum and supporting documents, confirmed this responsibility and duty to report and the staff's (volunteers and contractors) knowledge of their responsibilities. Based on the interviews and review of documents, this standard is found in compliance.

Standard 115.65 Coordinated response

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

The Sanchez Unit uses the TDCJ Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual, which outlines how to respond to an allegation of sexual abuse and requiring a coordinated response effort. The auditor noted on the Sanchez Unit's checklist response for this standard, 115.65 that the SPPOM was used as the basis for a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services, victim advocates or victim offender representatives (OVR) the unit leadership, and others as necessary. The auditor also discussed with the Warden an incident review team, that although it is noted there were no allegations of sexual abuse and that the SPPOM outlined procedures for a coordinated response, this was one of the things that the Incident Review Team (that meets routinely) could discuss and make sure that duties and responsibilities were accomplished, relevant to the uniqueness of the Sanchez Unit itself.

The Safe Prisons/PREA Plan details the coordinated response actions are to be taken in response to an incident of sexual abuse, and states the following, "... Sexual abuse response and notification procedures contained within the plan and the SPPOM shall be followed to coordinate actions taken in response to an incident of sexual abuse".

The auditor reviewed general operations, day-to-day performances, and observed during the on-site visit the teamwork between departments, and between supervisory in line staff at the Sanchez Unit and was highly impressed with the overall performance, cooperation, and communications. The auditor was impressed with the leadership, the teamwork, and the pride and professionalism of the staff.

Based on the above information, discussion, policies and procedures, and the interviews with key staff and random interviews with staff and inmates, this standard is found in compliance.

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)

The TDCJ does not collectively bargain nor enter into collective bargaining agreements that limits the Agency's ability to protect inmates from contact with abusers (i.e., Staff sexual abusers pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted). Neither the Agency nor the facility has entered into a collective bargaining agreement as outlined in standard 115.66, thus, this standard is assessed as compliant.

Standard 115.67 Agency protection against retaliation

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

The Safe Prisons/PREA Plan of the TDCJ, supported by the Safe Prisons/PREA Operations Manual sections 02.04 and 05.08 protect inmates and staff from retaliation. Further, specific Personnel Directives PD-13, PD-29, PD-31, protects all staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other staff.

Personnel policies also cover sexual harassment and discourteous conduct of a sexual nature, discrimination in the workplace, sexual misconduct with offenders, and establish general rules of conduct; all which assist in protection against retaliation.

There is a 90 day minimum monitoring time frame for retaliation review. Monitoring is assisted by offender and staff ninety-day monitoring forms (which can be extended if necessary), as well as other intervention practices which are indicative of the Agency's and the institution's commitment to prevent retaliation.

The Sanchez Unit designates to its Major and PREA Compliance Manager, the responsibility of monitoring retaliation by inmates and staff, with oversight by the Warden.

In the past 12 months there have been zero number of times an incident of retaliation has occurred. This information supplied by the Pre-Audit Questionnaire.

Based on the auditor's review of documents, policies and procedures, and formal interviews with specialized staff, this standard is assessed as compliant.

Standard 115.68 Post-allegation protective custody

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

Administrative Directives, AD-03.50 and AD-04.63, as well as the Agency's Administrative Segregation Plan prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If determined such housing is necessary, the Sanchez Unit explores other alternatives, such as housing assignment, location, supervision/monitoring, or transfer.

The auditor observed, during the on-site visit, the individual treatment that was afforded each inmate and clearly involuntary segregated housing would be used very judiciously. It is noted that in the past 12 months there have been zero number of times that an inmate has been placed in involuntary segregated housing for one or more hours while awaiting completion of an assessment or for longer than 30 days while awaiting alternative placement.

If involuntary segregated housing is made, the facility affords each inmate a review every 30 days. This is not been the case at the Sanchez Unit for there has been no involuntary segregated housing.

Based on the auditor's review of the information and the policies and procedures, and interviews with staff and inmates, this standard is found in compliance.

Standard 115.71 Criminal and administrative agency investigations

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

The Safe Prisons/PREA Plan of the TDCJ, addresses investigations under the section of the plan titled: Investigations, General Considerations. The General Considerations section directs and outlines the following:

- 1) a uniform evidence protocol to investigate sexual abuse and sexual harassment,
- 2) sexual investigation shall be conducted promptly, early, and objectively including third-party and anonymous reports, and
- 3) the use of investigators who have been specially trained in sexual abuse investigations pursuant the TDCJ Safe Prisons/PREA Plan.

It is noted that this standard contains 12 subsections, a-l, and as with all standards and subsections, they were reviewed by the auditor utilizing policies, procedures, observation, reviews, and interviews to assess compliance of this standard with PREA. Specifically, some of the information used included Administrative Directives, AD-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, AD-16.03 Evidence Handling; Board Policy BP-01.07; and the Safe Prisons/PREA Plan, and the SPPOM; all of which addressed the Agency's policy related to criminal and administrative investigations, including substantiated allegations of conduct that appear criminal and are referred for prosecution.

The Office of the Inspector General addresses and insures retention of all written reports for as long as the alleged abuser is incarcerated or employed by the Agency, +5 years.

Based on interviews with investigators, specialized staff, and the policies, manuals, procedures, and documents mentioned
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above, the auditor assesses this standard as compliant.

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 evidentiary standard for administrative investigations, 115.72, stipulates that the Agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. To assess the standard, the auditor reviewed policy and documentation, including the Safe Prisons/PREA Plan, the SPPOM, and the Agency's Administrative Review: Sexual Assault/Abuse policy. The auditor also interviewed investigators as well. The documents, as well as the investigators responses indicated that a preponderance of the evidence was the evidentiary standard used for administrative investigations.

The policy direction from the TDCJ is quoted out of the plan and manual, indicating: "... The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated". The information goes on further to inform us that a preponderance of the evidence means more than 50% of the evidence supports the allegation.

Based on the interviews and the information above, the auditor assesses compliance for this standard.

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 TDCJ has a policy outlined in the Safe Prisons/PREA Plan and the SPPOM detailing that following an investigation into an inmate's allegation of sexual abuse, the inmate is informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

Specifically attachments to the SPPOM: attachment F Classification Committee Notification of Substantiated, Unsubstantiated or Unfounded; attachment M Offender Notification; and attachment J Offender Acknowledgment; ensure reporting, and notification to the inmate. The plan and the manual also address the information within the notification to the inmate, reference an allegation that a staff member has committed sexual abuse, and/or the allegation that the inmate was abused by another inmate. These documents are maintained.

There were zero number of criminal and or administrative investigations of alleged inmate sexual abuse at the Sanchez Unit that were completed by the Facility, or the Agency in the past 12 months.

Based on the auditor's review of the Agency's policy and procedures (plan and manual), the attachment forms and based on interviews with key staff at the Sanchez Unit, this standard is found compliant.

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)

The Personnel Policy of the TDCJ stipulates that employees or representatives of the Department are expected to adhere to the highest standards of conduct while on duty or off duty, including adherence to the Rules of Conduct and the Outlines for Disciplinary Sanctions. The following were reviewed by the auditor to help assess compliance for this standard:

Executive Directive, ED-13 Sexual Harassment and Discourteous Conduct of a Sexual Nature, Personnel Policy, PD-29, Sexual Misconduct with Offenders, Human Resource Department Guidelines for Employees, and the Texas Penal Code which addresses sexual abuse of inmates and the fact that it may rise to the level of a felony offense.

These policies and procedures, including the Safe Prisons/PREA Plan, all address performance and behavior expected of staff who work with inmates, and address sanctions and actions related to sexual abuse, sexual harassment, sexual misconduct, and voyeurism, in the TDCJ.

In the past 12 months there have been zero number of staff from the Sanchez Unit that have violated Agency sexual abuse or sexual harassment policies. In the past 12 months there have been zero number of staff who have been terminated or resigned prior to termination for violating Agency sexual abuse or sexual harassment policies. In the past 12 months there have been zero number of inmates or staff who have been disciplined short of termination for violation of Agency sexual abuse or sexual harassment policies. This information taken from the Pre-Audit Questionnaire and confirmed by interviews with key staff at the facility.

Based on the auditor's review of policies and procedures and interviews with staff and inmates, the auditor assesses this standard as compliant.

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 Texas Department of Criminal Justice has a very thorough and comprehensive Volunteer Service Plan (VSP) which, in conjunction with its Safe Prisons/PREA plan, outlines the responsibilities and conduct for volunteers and contractors who have contact with inmates. The Agency has a policy that requires any contractor or volunteer who engages in sexual abuse to be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant and licensing bodies. This is also explained in the orientation and training videos for volunteers and contractors, and documented and acknowledged by signature forms/agreements.

There is specialized training and orientation which is required for volunteers and contractors. The auditor noted that each volunteer and contractor is made aware of how to appropriately conduct themselves with inmates and that volunteers and contractors are well aware of the gravity of disciplinary sanctions that may affect any volunteer or contractor who engages in sexual abuse and/or sexual harassment of an inmate. Interviews with contractors and volunteers confirm the training, orientation and the signature of acknowledgment forms/agreements.

In the past 12 months there have been zero number of contractors or volunteers who have been reported to law enforcement for engaging in sexual abuse of inmates or who have been reported to licensing boards.

Based on the auditor's review of policies, procedures, and documents and interviews with volunteers and contractors, this standard is assessed as compliant.

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 Inmate Disciplinary Policy, GR-106, Disciplinary Rules and Procedures for Offenders, and the Safe Prisons/PREA Plan outline disciplinary sanctions for inmate on inmate sexual abuse and sexual harassment. The Inmate Discipline Policy clearly identifies individual disciplinary sanctions for inmates. The Inmate Discipline Policy is a substantial 45+ page document outlining major and minor offenses, all with different levels of sanctions in detail, but clearly indicating a very formal disciplinary process by administrative action. Inmates are subject to administrative disciplinary sanctions only pursuant this formal disciplinary process.

In the past 12 months there have been zero number of administrative findings of inmate on inmate sexual abuse that have occurred at the facility. Additionally, in the past 12 months there have been zero number of criminal findings of guilt for inmate on inmate sexual abuse that have occurred at the facility. This information taken from the Pre--Audit Questionnaire.

The Agency disciplines inmates for sexual contact with staff only upon the finding that the staff member did not consent to such conduct. The Agency prohibits disciplinary action for reports of sexual abuse made good faith. The Agency also prohibits all sexual activity between inmates. The Agency direction is outlined in the Safe Prisons/PREA Plan and the Inmate Discipline Policy, GR-106.

Based on the auditor's review of policies, procedures, documents and interviews with staff and inmates, this standard is assessed as compliant.

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)

Texas Tech University is the contractor at the Sanchez Unit responsible for healthcare. The auditor had the opportunity to visit with the Regional Medical Director (M.D.), and to conduct formal interviews with the Medical Director and several of her staff. The TT health care staff at the Sanchez Unit were professional in the performance of their duties, responsibilities and information disclosure and duty to report rules as observed and reviewed by the PREA auditor. The staff were insightful and one could observe their commitment to inmate care and their passion for excellence.

Medical and mental health screenings and history of sexual abuse are directed by this standard, the Safe Prisons/PREA Plan, The Safe Prisons/PREA, the Operational Manual, and Correctional Managed Healthcare policies, CMHC G-35.1, G-35.2, and G-57.1. These all direct screenings and history of sexual abuse with follow-up meetings taking place within 14 days of the initial intake screening for both victims of sexual abuse and inmates who have previously perpetrated sexual abuse. All information related to sexual victimization and abusiveness that occurred in the institutional setting is strictly limited to medical and mental health practitioners and other staff as necessary to make informed treatment plans, and security and management decisions.

In the past 12 months, 100% of the inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. In the past 12 months, 100% of the inmates who have previously perpetrated sexual abuse as indicated during the screening were offered a follow-up meeting with a mental health practitioner. No inmates under 18, are housed at the Sanchez Unit, thus health care practitioners obtained informed consent from inmates before reporting information about prior victimization that did not occur in an institutional setting.

Based on interviews with staff and inmates, on the review of intake policies and procedures as well as healthcare policy and procedures, and on the supporting documentation, as well as observation of the Medical and Mental Health Department operations, the auditor assesses this standard as compliant.

Standard 115.82 Access to emergency medical and mental health services

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

Inmate victims of sexual abuse received timely, unimpeded access to emergency medical treatment and crisis intervention services at the Sanchez Unit. All inmates are offered access to emergency medical treatment at the facility. The nature and scope of services are determined by the medical and mental health practitioners at the facility, according to their professional judgment. Emergency Medical Services can also be accessed through 911 services with the support of the local hospitals, including the University Medical Center of El Paso, a level I Trauma Center; the nearby Sierra Providence Hospital, the neighboring Sheriff Office/emergency medical/fire services 911 services, and the on-call support services of the facility and regional TT staff.

Services are outlined in the Agency Correctional Managed Healthcare policies, CMHC A-01.1 Access to Care; CMHC G-51.1 Sexual Assault/Sexual Abuse; and generally outlined in the Safe Prisons/PREA Operations Manual. Medical capabilities are described in the unit directory as "Ambulatory, medical and dental services. Telemedicine services available. All services on a single level. Managed by Texas Tech."

Based on the auditor's observation of healthcare operations, interviews with key health care staff, interviews with inmates and random facility staff, and his review of policy and procedures, this standard is assessed as compliant.

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 Prisons/PREA Plan, the SPPOM 05.01 (attachment J), and the Correctional Managed Healthcare policy, G-57.1, direct and outline the medical and mental health evaluations for sexual abuse victims and abusers within the TDCJ and at the Sanchez Unit. Treatment is extended by professional judgment of health services practitioners to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The Safe Prisons Plan indicates: 1) All offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile unit shall be offered medical and mental health services evaluation and treatment as appropriate; 2) the evaluation and treatment of sex offenders shall include services such as, treatment plans and when necessary, referrals for continued care; 3) the offender victim shall be provided medical and mental health services consistent with the community level of care; 4) not applicable (this references female offenders); 5) offenders will be offered medical services as determined by health care practitioners; 6) a mental health evaluation of all offender on offender abusers is attempted within 60 days of hearing of the abuse, and treatment offered when deemed appropriate in accordance with CMHC policies.

Brochures, handouts and materials on sexual assault awareness are distributed to the inmates during intake, advising the population of offerings by the medical and mental health care staff. Randomly selected inmates confirmed that Texas Tech University's staff were attentive to and cared for inmates at the facility. The staff were aware of the options for victims and abusers pursuant PREA.

The auditor interviewed specialized Texas Tech healthcare staff, key staff at the facility, community healthcare/victim support services staff, and reviewed policies, procedures and practices, confirming compliance. This standard is assessed as compliant.

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)

There is a PREA Incident Review Team at the Sanchez Unit that conducts an incident review at the conclusion of all sexual abuse investigations, either criminal or administrative unless the allegation has been determined to be unfounded. There have been zero number of criminal or administrative investigations of alleged sexual abuse completed at the facility in the past 12 months, thus there have been no official incident reviews. Even though there have been no sexual abuse incident reviews per se, the Warden has appointed an Incident Review Team that includes the Assistant Warden, the Unit PREA Compliance Manager, and other key staff including medical and mental health practitioners. This group meets routinely to consider their responsibilities and review policies and procedures that would assist the team in the performance of its duties.

The Safe Prisons PREA Operational Manual directs that a Sexual Abuse Incident Team will review all instances of sexual abuse at the conclusion of every criminal or administrative investigation unless the investigation was determined to be unfounded. Specifically, the manual directs that the Incident Review Team shall 1) complete an administrative review for all alleged sexual abuse and staff sexual harassment incidents, 2) the review shall be conducted in accordance with policy, 3) the review team will include upper-level management with input from line supervisors, investigators, and medical or mental health practitioners, and 4) the unit shall implement recommendations that results from the review or document reasons for not doing so. The Sanchez Unit Incident Review Team continually and routinely discusses and reviews its duties and responsibilities.

At the end of each month, the Unit PREA Compliance Manager submits a monthly Safe Prisons/PREA Report to the Regional Office listing the number of allegations of sexual abuse and incident team reviews, if and as necessary. Again, in the past 12 months there have been no allegations of sexual abuse at the Sanchez Unit.

Based on the auditor's review of documentation and interviews with Incident Review Team members, the Unit PREA Compliance Manager, the Regional PREA Compliance Manager, and the Warden, this standard is assessed as compliant.

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 TDCJ and the Sanchez Unit collects accurate, uniform data for every allegation of sexual abuse. The Texas Board of Criminal Justice (TBCJ) has established policy outlining the mission of the PREA Ombudsman to provide a point of contact for the public, elected officials, and offenders who have complaints or inquiries regarding allegations of sexual abuse, sexual contact, staff sexual misconduct, or initiatives related to PREA. The PREA Ombudsman Office also includes collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from each correctional facility. The Office

directs that statistical information regarding the total number of allegations of sexual assault, sexual contact, and staff sexual misconduct investigated by the TDCJ, the TBCJ Ombudsman's Office, the Office of the Inspector General and the outcome of those investigations, and/or any disciplinary actions resulting from the allegations will be made public and will be in the Agency's Annual Report. This information taken from and required by the Board Policy BP-02.09 PREA Ombudsman Policy Statement.

The Survey of Sexual Violence (SSV), the federal government standardized instrument for data collection, which is used by and conducted by the Department of Justice, was completed by the TDCJ and was used as part of the documentation for compliance with this standard on data collection. The auditor reviewed this report and the monthly reports submitted by the Sanchez Unit.

Based on the reports, the survey, information from the PREA Ombudsman's Office website, and interviews with the Warden and the Unit PREA Compliance Manager, the auditor assesses this standard as compliant

Standard 115.88 Data review for corrective action

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

The TDCJ, as stated in the data collection standard, collects Prison Rape Elimination Act data for this largest of state prison systems. The Agency is continually assessing the information obtained from the data. The auditor reviewed the information from the Survey of Sexual Violence (SSV), and reviewed several of the website's topics which included some of the following: Administrative Review and Risk Management, Advisory Council on Ethics, Annual Reviews from 2005-2014, the PREA Ombudsman's Safe Prisons Program Report 2009-2014, Victim Services, and others. The auditor found at least 18 sections covering a wealth of information. Of particular interest was the Ombudsman's Safe Prisons Program Report.

The auditor reviewed monthly reports that are submitted to the Agency with the compilation of the unit information that is disseminated and sent out to each facility. By use of the data collected, problems identified, issues, reviewed; staff training and professional development were continually assessed, institutional staffing reviewed, and the overall improvement and development of the TDCJ addressed.

Based on the information from data collection, based on the compiled monthly reports, based on the website information including past PREA Final Reports, and based on interviews with the Regional PREA Compliance Manager, Unit PREA Compliance Manager, and other key staff, the auditor assesses compliance for this standard.

Standard 115.89 Data storage, publication, and destruction

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

The TDCJ insures incident-based and aggregate data is retained pursuant PREA standard 115.87 pursuant the Texas State Statutes and the State of Texas Record Retention Schedule. Procedure and practice is outlined through the Agency's policy which specifically states that the appropriate and complete collection and use of data outlined in the previous two standards and published on the website is for at least 10 years from the initial date of collection. Some materials are much longer as directed for special investigations, criminal investigations, staff misconduct, and etc.

The Agency Safe Prisons/PREA Plan also addresses aggregate sexual abuse data collection from private facilities with which the TDCJ has contracted for housing Texas criminal/inmate offenders. This information is also maintained for at least 10 years.

Data information (concerning that agency as a whole and individual institutional PREA summary reports) is located on the TDCJ website <http://www.tdcj.state.tx.us> and its various links.

Based on review of the Texas Record Retention Schedule, the Agency's policies and procedures, and interviews with the Warden, the Regional PREA Compliance Manager, and Unit PREA Compliance Manager, the auditor assesses this standard as compliant.

AUDITOR CERTIFICATION

I certify that:

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

James Curington

August, 17, 2016

Auditor Signature

Date