PREA Facility Audit Report: Final

Name of Facility: Jordan-Baten Complex
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 10/27/2026

Auditor Certification	
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.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Cynthia Swier	**Date of Signature:** 10/27/2026

AUDITOR INFORMATION	
Auditor name:	Swier, Cynthia
Email:	swierconsultants@gmail.com
Start Date of On-Site Audit:	10/30/2025
End Date of On-Site Audit:	10/02/2026

FACILITY INFORMATION	
Facility name:	Jordan-Baten Complex
Facility physical address:	1992 Helton Road, Pampa, Texas - 79065
Facility mailing address:	

Primary Contact

Name:	Lindsey Maxfield
Email Address:	lindsey.maxfield@tdcj.texas.gov
Telephone Number:	806-665-7070

Warden/Jail Administrator/Sheriff/Director	
Name:	Jaime Villegas
Email Address:	Jaime.Villegas@tdcj.texas.gov
Telephone Number:	806-665-7070

Facility PREA Compliance Manager	
Name:	Lindsey Maxfield
Email Address:	lindsey.maxfield@tdcj.texas.gov
Telephone Number:	806-665-7070
Name:	Leo Ramirez
Email Address:	leo.ramirez@tdcj.texas.gov
Telephone Number:	(806) 665-7070 Ext 3

Facility Health Service Administrator On-site	
Name:	Julie Andis
Email Address:	Julie.Andis@ttuhsc.edu
Telephone Number:	806-665-7070

Facility Characteristics	
Designed facility capacity:	1152
Current population of facility:	1107
Average daily population for the past 12 months:	1294

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys
Age range of population:	18-79
Facility security levels/inmate custody levels:	G1, G2, G4, Transient, Parole Offenders
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	318
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	41
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	95

AGENCY INFORMATION	
Name of agency:	Texas Department of Criminal Justice
Governing authority or parent agency (if applicable):	
Physical Address:	861 Interstate 45, Huntsville, Texas - 77320
Mailing Address:	PO Box 99, Huntsville, Texas - 77340
Telephone number:	8005350283

Agency Chief Executive Officer Information:	
Name:	Bobby Lumpkin
Email Address:	Bobby.Lumpkin@tdcj.texas.gov
Telephone Number:	936-437-2101

Agency-Wide PREA Coordinator Information			
Name:	Carina Garcia	**Email Address:**	carina.garcia@tdcj.texas.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
3	• 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.17 - Hiring and promotion decisions • 115.33 - Inmate education
Number of standards met:	
35	
Number of standards not met:	
0	
Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	7

AGENCY AUDIT FINDINGS

Summary of Audit Findings

These standards were audited at the agency-level. For more information, please see the attached agency audit report found at the end of this document.

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
0	
Number of standards met:	
10	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-10-30
2. End date of the onsite portion of the audit:	2026-10-02

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International - no response

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1428
15. Average daily population for the past 12 months:	1101
16. Number of inmate/resident/detainee housing units:	24
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	( ) Yes (●) No ( ) Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	1101
25. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
27. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	4
28. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	4
29. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	72
30. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	8

31. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
32. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	8
34. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	289
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	247

38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	39
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	31
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☑ Age ☑ Race ☑ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☑ Housing assignment ☐ Gender ☐ Other ☐ None

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor was provided with the facility offender roster for selection of a random representation of offenders. The facility roster includes the offender's age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, and housing assignment. This allowed the Auditor to accurately select a random representation of offenders for the random interview process.
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	(●) Yes ( ) No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	22

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/ resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/ residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

47. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	The auditor consulted with medical staff who confirmed that there were no inmates with physical disabilities housed here.
48. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	The auditor consulted with medical staff who confirmed that there were no inmates with cognitive disabilities housed here.
49. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	4
50. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	4
51. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	6
52. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	8
53. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
54. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	The auditor verified with the PCM and the housing roster that those inmates who previously reported a sexual abuse were no longer housed at the facility.
55. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
56. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	The facility does not house inmates in this status for risk of sexual victimization.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	17
63. Were you able to interview the Agency Head?	(●) Yes ( ) No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
65. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
66. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	☑ Agency contract administrator ☑ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment ☐ Line staff who supervise youthful inmates (if applicable) ☐ Education and program staff who work with youthful inmates (if applicable) ☑ Medical staff ☐ Mental health staff ☐ Non-medical staff involved in cross-gender strip or visual searches ☑ Administrative (human resources) staff ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff ☑ Investigative staff responsible for conducting administrative investigations ☐ Investigative staff responsible for conducting criminal investigations ☑ Staff who perform screening for risk of victimization and abusiveness ☑ Staff who supervise inmates in segregated housing/residents in isolation ☑ Staff on the sexual abuse incident review team ☑ Designated staff member charged with monitoring retaliation ☑ First responders, both security and non-security staff ☑ Intake staff

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☑ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☑ Education/programming ☑ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	(●) Yes ( ) No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	(●) Yes ( ) No
74. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	The auditor conducted informal interviews with inmates and asked them regarding how to report an incident, and asked them to demonstrate if they had a tablet. I also asked them if they felt safe in the facility and comfortable reporting to staff and if they felt that staff would respond appropriately.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Documents from offender files from a sample of inmates interviewed to include: Date of intake Documentation of initial PREA education received Documentation of risk screening and any follow up / referral to mental health, if applicable Documentation of comprehensive PREA education Documentation of Risk Re-assessment. For staff interviewed, I requested documentation for a sample of staff interviewed to include: Date of hire Documentation of initial PREA training Documentation of annual PREA training

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

79. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	1	2	0
Staff-on-inmate sexual abuse	5	0	5	0
Total	7	1	7	0

80. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

81. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

82. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	4	3	0
Total	0	4	3	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

83. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

84. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	7

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no sexual harassment allegations or investigations.
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	( ) Yes ( ) No (●) NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes ( ) No (●) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

Non-certified Support Staff

103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?	◉ The audited facility or its parent agency ○ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ○ A third-party auditing entity (e.g., accreditation body, consulting firm) ○ Other

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Executive Directive ED-03.03, Safe Prisons Program Facility Organizational Chart Agency Organizational Chart Interviews: PREA Compliance Manager (PCM)

	Findings (By Provision): 115.11 (a): The agency has a comprehensive PREA Policy: Safe Prisons/PREA Plan as well Executive Directive, Post Orders, and other policies and procedures that supplement the PREA Plan. The agency mandates a zero-tolerance policy towards all forms of sexual abuse and sexual harassment and outlines the strategies on preventing, detecting and responding to such conduct. Agency policies address "Preventing" sexual abuse and sexual harassment through the designation of a PC, criminal history background checks (staff, volunteers and contractors), training (staff, volunteers and contractors), staffing, intake/risk screening, inmate education and posting of signage (PREA posters, etc.). The policies address "Detecting" sexual abuse and sexual harassment through training (staff, volunteers, and contractors), and intake/risk screening. The policies address "Responding" to allegations of sexual abuse and sexual harassment through reporting, investigations, victim services, medical and mental health services, disciplinary sanctions for staff and inmates (including notification of licensing agencies), incident reviews and data collection. This policy is consistent with the PREA standards and outlines the agency's approach to sexual safety. 115.11 (c): The facility has a staff member designated as the Safe Prisons / PREA Compliance Manager who is responsible for ensuring PREA compliance. The facility organizational chart confirms this staff member is responsible for PREA compliance and that staff member reports to the Warden. The interview with the Compliance Manager indicated this staff member has sufficient time to coordinate the facility's PREA compliance. Staff consistently stated during interviews that the PCM routinely trains and educates staff on PREA policies and standards through various methods such as verbal discussions, memos, etc. The agency has a PREA policy, has designated an upper-level, agency-wide PC as verified through the organizational chart and has a PREA Compliance Manager as verified through the organizational chart. Based on the review of the PAQ, the Safe Prisons PREA Plan, ED-03.03, the interview with the facility PREA Compliance Manager and the agency and facility organizational charts, this standard is determined to be compliant.

115.12	**Contracting with other entities for the confinement of inmates**
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

	Documents: Pre-Audit Questionnaire Administrative Directive AD-02.46, Employees of Private Businesses and Governmental Entities Contracting with the TDCJ Contracts for Confinement of Inmates Interviews: Agency Contract Administrator Findings (By Provision): 115.12 (a): The TDCJ Agency Audit Report was completed on 09/26/2025 by certified PREA auditor Matthew Taylor. The facility does not have any responsibility for this standard, separate from the agency’s responsibilities. Based on the above, this standard is designated as not applicable for the facility audit.

115.13	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Administrative Directive AD-11.52, Security Staffing Security Operations Procedures Manual SOPM-08.06, Security Operations Annual Review of Turnout Rosters Procedures Employee and Visitor Log (Showing Unannounced Rounds) TDCJ Correctional Institutions Division, Statement of Participation, Annual Staffing Plan Review

	Unit Staffing Rosters Security Operations Procedures Manual SPOM – 08.01, Turnout Roster Management Post Orders 07.003, Captain of Correctional Officers Post Orders 07.004, Lieutenant of Correctional Officers Post Orders 07.005, Sergeant of Correctional Officers Post Orders 07.002, Major of Correctional Officers Annual Unit Staffing Plans Annual Unit Staffing Plan Reviews Interviews: Warden PREA Compliance Manager PREA Coordinator Intermediate-Level or Higher-Level Facility Staff Site Review Observations: Staffing Levels Security Rosters for all Shifts – Unannounced rounds documented on all shifts Staff line of Sight Camera locations Frequency of cell checks Camera Monitoring Informal Conversations with Staff regarding supervision practices Informal Conversations with Inmates regarding staffing presence Findings (By Provision): 115.13 (a): AD-11.52 indicates that the Security Operations Department is

	responsible for approving staffing plans and shift turnout rosters for each state operated unit. The staffing plan takes into consideration; generally accepted detention practices, any judicial findings of inadequacy, any finding of inadequacy from Federal investigative agencies, any finding of inadequacy from internal or external oversight bodies, all components of the facility's physical plant, the composition of the inmate population, the number and placement of supervisory staff, the institutional programs occurring on a particular shift, any applicable State or local laws, the prevalence of substantiated and unsubstantiated incident of abuse and any other relevant factors. The current staffing plans for each unit were reviewed and indicated that staffing was based on the facility's average daily number of inmates (1152). Each shift has a building Lieutenant and a building Sergeant that serve as the shift supervisors. A building Captain and a building Major are on-site Monday through Friday and serve as the highest security supervisory level staff. A dorm rover is responsible for two dorms each shift, while a floor rover is responsible for security of all dorms and areas on that specific floor. Additional officers are assigned to other areas to include: recreation, shakedown, escort, kitchen, intake, transport, visitation, utility, etc. The annual staffing plan was reviewed. The review contained the following determinations: There were no changes necessary to the unit's staffing plan or shift turnout rosters Additional or enhanced video surveillance equipment was not required The unit is utilizing all resources available (e.g. overtime, recruiting efforts) to ensure adequate security staff is available to meet the requirements of the staffing plan. During the site review, the auditor was able to observe the staffing on shift and compare the staffing plan against the actual staffing. The auditor was also able to assess lines of sight and any blind spots. It was observed that work, program and housing spaces are well monitored by staff. Interviews with the Warden and the PCM confirmed that the facility has a staffing plan that provides adequate staffing levels and that they comply with the plan on a regular basis. 115.13 (b): The facility indicated in the PAQ that deviations from the staffing plan had

occurred and indicated these occurrences were due to transportation, staffing, lockdowns and special events. The SOPM-08.01 indicated on page 2 that all deviations from the staffing plan are required to be documented on the back side of the security roster. A review of a sample of security rosters indicated that any deviations were documented on the back of the roster and that the Warden was required to approve any deviations.

The interview with the Warden indicated that all deviations are documented on the back of the daily rosters and that anytime a deviation occurs the Warden was required to obtain approval through the Region Office. These approvals by the Regional Director were reviewed and copies provided to the auditor. During the site review, the auditor observed the staffing. The staffing appeared to be sufficient. Line of sight was noted and blind spots were addressed through security mirrors and staff roving. The level of supervision by staff appeared to be adequate. The facility vacancies for staff are augmented by staff working overtime to accommodate and satisfy staffing needs. Informal conversations with inmates as well as staff indicated that there are times when the facility is short staffed, however, additional staff are brought in for overtime.

115.13 (c): The annual staffing plans were reviewed for 2023, 2024 and 2025 and were signed by the Regional Director, the Warden, the Assistant Director of Security Operations, the PREA Ombudsman and the Staffing Coordinator for Security Operations. The plan was reviewed to assess, determine and document whether any adjustments were needed to the staffing plan, the unit’s deployment of video monitoring technologies and/or the resources the unit had available to commit to ensuring adherence to the staffing plan. SOPM 08.06 and the Safe Prison/PREA Plan, page 10-11, describe the required annual review.

The PC confirmed in the interview that she is consulted regarding staffing assessments. Each facility provides staffing information and PREA-related data for review to determine whether adjustments to the staffing, supervision or monitoring practices are needed. This review occurs annually and as needed. The 2024 Unit Statement of Participation for the Annual Staffing Plan Review was also provided in the PAQ.

115.13 (d): The SAFE Prison/PREA Plan, page 9, section B, indicates that security supervisors are required to conduct and document unannounced rounds on all shifts to identify and deter sexual abuse and sexual harassment. The requirement for conducting unannounced rounds is also included in the post orders for Sergeants, Lieutenants, Captains and Major. Unannounced rounds are conducted by the building Sgt., Lt. and/or Captain and are documented at the bottom of the shift turnout roster.

	It was noted during the on-site audit that rounds are documented in the housing unit log books as “PREA Rounds.” Interviews conducted with intermediate/higher level staff indicated that supervisors are required to make unannounced rounds daily. A review of the PAQ supplemental documentation as well as a review of the area log books on-site indicated that supervisory rounds were being made and documented on all shifts. Additionally, the SAFE Prisons/PREA Plan prohibits staff from alerting other staff members about the rounds unless the announcement is related to legitimate operational functions of the unit. During the interviews, supervisory staff indicated that they deviate their times and locations to prohibit staff from alerting other staff about the rounds. Based on a review of the documentation provided as well as the information obtained in the interviews and the observations made by the auditor, this standard is determined to be compliant.

115.14	**Youthful inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Statement of Fact regarding Youthful Inmates Safe Prisons / PREA Plan CYPOM 01.02 Separation of Youth PO-07.140 Champions Youth Program (CYP) Inmate Officer PO-07.142 Youthful Offender Program Captain of Correctional Officers PO-07-141 Youthful Offender Program Offender Housing Area Officer UCP 04.19 Youthful Offenders CYPOM 04.11 Alternative Treatment Program I-219 Exercise Pamphlet (English and Spanish)

Interviews:

Warden

PREA Compliance Manager

Site Review Observations:

Observations in Housing Units Related to Age of Inmates – None under the age of 18

Findings (By Provision):

115.14 (a): The Safe Prisons/PREA, Plan page 10, section C, states that youthful offenders shall not be placed in housing units where the youthful offender will have sight, sound or physical contact with any adult offender through the use of a shared dayroom or other common space, shower area or sleeping quarters.

A review of the daily population report indicated that no inmates under the age of 18 were housed at the unit within the previous twelve months. During the site review, it was observed that no inmates under the age of 18 were housed at the facility.

115.14 (b): The Safe Prisons/PREA Plan, page 10, states that when youthful offenders are outside of the housing areas, correctional staff shall maintain sight and sound separation between youthful offenders and adult offenders as well as provide direct supervision when youthful offenders and adult offenders have any sight, sound or physical contact. A review of the daily population report indicated that no inmates under the age of 18 were housed at the unit within the previous twelve months. During the site review, it was observed that no inmates under the age of 18 were housed at the facility.

115.14 (c): The Safe Prisons/PREA Plan page, 10, section C, indicates that the agency (TDCJ) shall make best efforts to avoid placing youthful offenders in isolation for the purpose of maintaining sight and sound separation. It also indicates that daily large muscle exercise and legally required special education services required to comply with the standard shall not be denied except in exigent circumstances. Additionally, youthful inmates shall have access to other programs and work opportunities to the extent possible. A review of the daily population report indicated that no inmates under the age of 18 were housed at the unit within the previous twelve months. During the site review, it was observed that no inmates under the age of 18 were

	housed at the facility. Based on a review of the documentation and policies provided and the interviews and observations made by the auditor, this standard is determined to be compliant.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Administrative Directive AD-03.22, Offender Searches Administrative Directive AD-02.22,Utilization of Body Scanners Post Order PO-07.006, Administrative Segregation Officer Post Order PO-07.023, Cellblock Officer Post Order PO-07.027, Dorm Officer TLDD Correctional Training and Staff Development (CTSD) Safe Prisons / PREA Program In-Service Training Curriculum TLDD Correctional Training and Staff Development (CTSD) Safe Prisons / PREA Program Supervisor In-Service Training Curriculum TLDD Correctional Training and Staff Development (CTSD) Pre-Service Training Block 1, Legal Responsibilities: Contraband and Searches Correctional Training and Staff Development (CTSD) Safe Prison, Extortion, PREA, Gender Specific Training (GST) Security Memorandum SM 02-25, On-the-Job Training Program Staff Training Records Statement of Fact – Limits to Cross Gender Viewing and Searches Executive Directive ED-12.10, Training and Records Database

	Executive Directive PD-97, Training and Staff Development Safe Prisons / PREA Operations Manual (SPPOM) 02.05 Cross-Gender Searches and Log Interviews: Random Staff Random Inmates Transgender/Intersex Inmates – N/A per Executive Order 14168 Site Review Observations: Observations of Privacy Barriers in Bathroom Areas Observation of Absence of Female Inmates Observation of Cross Gender Announcements Informal Conversations with Staff Informal Conversations with Inmates Findings (By Provision): 115.15 (a): The Safe Prisons/PREA Plan, page 9, section B as well as AD-03.22, page 2, prohibit staff from conducting cross gender strip searches and cross gender body cavity searches except in exigent circumstances. The PAQ indicated that no searches of this kind were conducted at the facility over the past twelve months and that the facility does not conduct these types of searches in general. Interviews with staff indicated that inmates are strip searched by male staff only. Interviews with inmates indicated that none had been naked in front of female staff. Informal Conversations with staff and inmates regarding search procedures indicated that strip searches are conducted by male staff and are conducted in a private area with privacy barriers. Transgender inmates are searched last and searches are conducted with privacy barriers. Per Executive Order 14168, compliance determinations are not made regarding the portion of this standard pertaining to transgender inmates.

	115.15 (b): AD-03.22, page 2, prohibit staff from conducting cross gender pat searches of female inmates. The PAQ indicated that no female inmates are housed at the facility and therefore this section of the standard would not apply to this Unit. A review of the daily population report for the previous twelve months as well as observations made during the site review indicated that no female inmates are or were housed at the facility in the previous twelve months. 115.15 (c): The Safe Prisons/PREA Plan, page 9 and AD-03.22 page 4, requires staff to document all cross-gender strip searches, cross gender visual body cavity searches and cross gender pat searches of female inmates by the security supervisor through the approving Warden. The PAQ indicated that no cross-gender searches have been conducted in the previous twelve months and that female inmates are not housed at the facility. 115.15 (d): The Safe Prisons/PREA Plan, page 9, section B as well as Post Orders 07.006, 07.023 and 07.027, indicate that the facility enables inmates to shower, perform bodily functions and change clothes without staff of the opposite gender viewing their breasts, buttocks or genitalia. Additionally, they require staff of the opposite gender to announce their presence prior to entering a housing unit. Interviews with random inmates and interviews with random staff indicated that inmates have privacy when showering, using the restroom and changing clothes via privacy barriers. Interviews also confirm that staff of the opposite gender announce their presence when entering a housing unit. Some inmates interviewed stated that they didn't hear or didn't pay attention to an announcement by female staff. During the site review, the auditor observed postings on the door of all housing units reminding opposite gender staff to announce their presence prior to entering. When the auditor entered a housing unit during the site review, staff announced, "female in the dorm". The auditor observed that all dorms had showers with some form of privacy barrier. The restrictive housing had toilets within the cell. The cells had a solid door with a small window for safety and security. The shower areas in this dorm had a barrier across the front for privacy. 115.15 (e): Per Executive Order 14168, this standard is N/A. 115.15 (f): Per Executive Order 14168, this standard is N/A. Based on a review of the PAQ, the Safe Prisons/PREA Plan, AD-03.22, Post Order PO-07.006, Post Order PO-07.023, Post Order PO-07.027, the Safe Prisons/PREA Program In-Service Training, the Contraband and Searches In-Service Training, a

	random sample of staff training records, observations made during the site review to include the presence of opposite gender announcement postings, privacy barriers, shower curtains and the opposite gender announcement as well as information from interviews related to inmate privacy in the bathroom as well as staff's training on professional and respectful searches, this standard is determined to be compliant.

115.16	**Inmates with disabilities and inmates who are limited English proficient**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Intake Procedures 1.10, Initial Orientation Correctional Managed Health Care Policy Manual A-08.03, Referral of Offenders to the Developmental Disabilities Program (DDP) Correctional Managed Health Care Policy Manual G-51.1, Inmates with Special Needs Correctional Managed Health Care Policy Manual G-51.5, Certified American Sign Language (ASL) Interpreter Services Safe Prisons / PREA Operations Manual 02.03, Safe Prisons / PREA Program Posting and Brochures Intake Procedures 6.05, Intake Processing of Inmates in Need of an Interpreter Security Memorandum SM-05.50, Qualified Spanish Interpreter Guidelines TTUHSC CMHC Quick Reference Guide to Access an Interpreter (LanguageLine Solutions) UTMB CMC Quick Reference Guide to Access an Interpreter (LanguageLine Solutions) TDCJ Training and Leader Development Division, In-Service Training, Safe Prisons / PREA Program Lesson Plan TDCJ Training and Leader Development Division, In-Service Supervisor Training, Safe Prisons / PREA Program Lesson Plan TDCJ Training and Leader Development Division, Pre-Service Training Block 1, Safe Prisons Module: Offender Protection Investigations PERS022

	Offender Orientation on Safe Prisons - Spanish Version PREA Video Script Offender Orientation on Safe Prisons – English Version PREA Video Script Offender Orientation Safe Prisons Video Script (English and Spanish) Certified American Sign Language (ASL) Interpreter Services Health Services Liaison Facility Types List Unit Qualified Staff Interpreters Interviews: Agency Head Inmates with Disabilities LEP Inmates Random Staff Site Review Observations: Observations of PREA Posters in English and Spanish Testing of access to interpretation services on -demand Assess availability of interpretation services Assess accessibility of interpretation services Observation of location of interpretation services Informal conversations with staff regarding accessibility of interpretation services Informal conversations with inmates regarding accessibility of interpretation services Findings (By Provision): 115.16 (a): The Safe Prisons/PREA Plan, page 20-21 establishes the procedure to provide disabled inmates an equal opportunity to benefit from all the aspects of the facility’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. Intake Procedures 1.10 states that every offender will receive orientation within 7 calendar days of arrival at an Intake Facility and written justification shall be provided in the Unit Classification File for each newly received offender who has not attended orientation within the 7 calendar days of arrival. Orientation Sign-In Sheets

will be used to document each offender's attendance. Inmates who are deaf or hard of hearing are provided information in American Sign Language (ASL) while inmates who are blind or have an intellectual/cognitive disability would be read PREA information.

The Employee Pre-Service Training states that special considerations must be made for inmates with disabilities, including inmates that are deaf or hearing impaired, and inmates with limited English proficiency. Staff should make every effort to provide access to qualified interpreters. CMHC G-51.1 states that The Correctional Managed Health Care Committee, its agents, and the TDCJ Health Services Division provide services for inmates who require medical supervision and/or multidisciplinary care. These include, but are not limited to inmates who: are chronically ill or have a communicable disease, require Assistive Disability Servies, are frail elderly, are terminally ill, are seriously mentally ill, have an intellectual disability and / or are pregnant.

Policies such as SM-05.50, Intake Procedures 6.05, TLDD In-service training and the Safe Prisons PREA plan further supplement the policies to assist inmates with disabilities or other accommodation needs.

Interviews with the Agency Head and inmates who have a disability indicated that inmates receive PREA information in a format that they can understand. Additionally, the auditor was able to utilize staff interpreters during the audit. A review of a sample of LEP inmate files indicated that they received PREA information and they understood the information. During the site review, staff interpreters were utilized and the PREA signage was observed to be in large text and in bright colors.

115.16 (b): The Safe Prisons/PREA Plan, page 20-21 establishes the procedure to ensure meaningful access to all the aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment to inmates who are Limited English Proficient (LEP). The agency has a staff translator list that is utilize by the facility for any inmates who are LEP. They can also utilize LanguageLine, a service they can call that will translate information between the staff member and LEP inmate. SPPOM 02.03 Attachments and interviews indicate that the agency's PREA information is available in numerous formats to include; written (English and Spanish), video, American Sign Language, etc. and that PREA information is available throughout the facility in English and Spanish. The UTMB CMC Quick Reference Guide to Access an Interpreter was also provided in the PAQ. Intake Procedures 1.10 states that Offenders identified as Spanish speaking only or limited English will be provided orientation in Spanish and this will be noted on the Orientation Sign-In Sheet. Certified American Sign Language Interpreter services will be provided in accordance

	with the Correctional Managed Care Policy Manual. Interviews with the Agency Head and inmates who are LEP indicated that inmates received PREA information in a format that they can understand. Additionally, the auditor was able to utilize staff interpreters during the audit. A review of a sample of files for LEP inmates indicated that they received PREA information and they understood the information. During the site review, it was observed that PREA signage was posted throughout the facility in English and Spanish. 115.16 (c): The Safe Prisons/PREA Plan, page 21, prohibits the use of inmate interpreters, readers or any other type of inmate assistants for allegations of sexual abuse and sexual harassment. The PAQ indicated that there were no instances where an inmate was utilized. Interviews with a random sample of staff indicated that inmates are not utilized to translate for PREA purposes. Staff indicated that they had a list of staff they could utilize to translate in these circumstances. Interviews with LEP inmates indicated that other inmates were not utilized to translate for them or provide assistance. The facility also provided a list of staff both at the facility and in the agency of staff who speak and can translate in languages other than English. Based on a review of the PAQ, the Safe Prisons/PREA Plan, the provided policies and procedures, the staff translator list, the Safe Prisons/PREA Program brochure with attachments, the observations made during the site review to include the PREA signage and the use of interpreters and the Language Line, as well as interviews with the Agency Head and LEP inmates, this standard is determined to be compliant and is rated as exceeds.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire

	Safe Prisons/PREA Plan Executive Directive PD-75, Applicants with Pending Criminal Charges or Prior Criminal Convictions Executive Directive PD-56, Request for and Release of Employment Information or Documents Executive Directive PD-73, Selection Criteria for Correctional Officer Applicants Employment Applicant Supplement for Agency Applicants PERS 598 Employment Application Supplement PERS 282 Executive Directive PD-71, Selection System Procedures Executive Directive PD-27, Employment Status Pending Resolution of Criminal Charges or Protective Orders Personnel Files of Staff Contractor Background Files Volunteer Background Files TDCJ Standard or Supplemental Safe Prisons / PREA Training, Employee Acknowledgement Form (signed staff forms) TDCJ New Hires List Interviews: Human Resource Staff Site Review Observations: Employee Personnel Files Contractor Personnel Files Findings (By Provision): 115.17 (a): The Safe Prisons/PREA Plan, page 27, section 1 as well as Executive Directive PD-75, indicates that the agency will not hire or promote anyone who may come in contact with inmates, and shall not enlist the services of any contractor who

	may have contact with inmates if they have: engaged in sexual abuse in prison, jail, lockup or any other institution; been convicted of engaging or attempting to engage in sexual activity in the community or has been civilly or administratively adjudicated to have engaged in sexual abuse by force, overt or implied threats of force or coercion. A review of personnel files of staff indicated that all staff are asked about the above incidents in their application. Additionally, all staff and contractors have a criminal background completed prior to being authorized to work at the facility. 115.17 (b): The Safe Prisons/PREA Plan, page 27, indicates that the agency considers any incidents of sexual harassment in determining whether to hire or promote any staff or enlist the services of any contractor who may have contact with an inmate. Human Resource staff indicated that sexual harassment is considered when hiring or promoting staff or enlisting services of any contractors. 115.17 (c): The Safe Prisons/PREA Plan, page 39, indicates that the agency is required to perform criminal background checks and make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignations during a pending investigation of sexual abuse for new employees that may have contact with inmates. The PAQ indicated that 100% (93) of those hired in the past twelve months that may have contact with inmates had received a criminal background check and prior institutional employers were contacted. A review of personnel files indicated 100% of the random sample reviewed had a criminal background completed initially and annually thereafter. Additionally, all staff are fingerprinted and any future arrest is automatically reported to the agency through the Fingerprint-based Applicant Clearinghouse of Texas (FACT). Human Resource staff indicated that all staff are required to have a criminal background check before they are hired and that all law enforcement agencies are contacted related to information on any prior substantiated allegations of sexual abuse or resignations while under investigation. 115.17 (d): The Safe Prisons/PREA Plan, page 39, indicates that the agency performs criminal background checks before enlisting the services of any contractor who may have contact with inmates. The PAQ indicated that there have been no (0) contracts at the facility within the past twelve months. The interview with Human Resource staff indicated that all contractors are required to have a criminal background check completed prior to working at the facility. 115.17 (e): The Safe Prisons/PREA Plan, page 39, outlines the system that is in place to capture criminal background information. The agency utilizes the FACT process. All

staff and contractors are fingerprinted and anytime an individual in this system is arrested the TDCJ is immediately notified. This system is more efficient than annual background checks as it is live information and the agency is notified immediately and able to terminate employment. All staff have an annual background completed each year in addition to the FACT process.

The interview with Human Resource staff confirmed that all staff and contractors are entered into the FACT system and that any arrests are immediately reported to the agency. Additionally, all staff have a criminal history check completed annually on their birthdate.

115.17 (f): The Safe Prisons/PREA Plan, page 38, indicates that the agency will ask all applicants and employees who have contact with inmates directly about whether they have: engaged in sexual abuse in prison, jail, lockup or any other institution been convicted of engaging or attempting to engage in sexual activity in the community or has been civilly or administratively adjudicated to have engaged in sexual abuse by force, overt or implied threats of force or coercion through a written application, during any interviews or through any written self-evaluations as part of a review of current employees. A review of personnel files of staff indicated that all staff were asked about the above incidents in their supplemental application. Additionally, the interview with Human Resource staff confirmed that these questions are contained on the employment application supplement that is required for all applicants.

115.17 (g): The Safe Prisons/PREA Plan, page 38, indicates that material omissions regarding sexual misconduct or the provision of materially false information is grounds for termination. Human resource staff confirm that any false information or omissions would result in an employee or contractor being terminated.

115.17 (h): Executive Directive PD-56 indicates that the agency will provide information related to substantiated allegations of sexual abuse or sexual harassment involving a former employee to institutional employers for whom the employee has applied to work. Human resource staff indicated that this information would be provided when requested.

Based on a review of the PAQ, the Safe Prisons/PREA Plan, PD-56, PD-75, a review of personnel files for staff and information obtained from the Human Resource staff interview, this standard is determined to be compliant and is rated as exceeds.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	This standard has been audited at the agency level. The facility does not have responsibility for this standard and it is, therefore, noted as Non-Applicable.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons PREA Plan Administrative Directive AD-16.03, Evidence Handling Safe Prisons / PREA Operations Manual (SPPOM) 05.01, Sexual Abuse Response and Investigation Attachment G Correctional Managed Health Care Policy Manual CMHCPM-G-57.01, Sexual Assault / Sexual Abuse TDCJ Office of the Inspector General, Operational Procedures Manual OIG-7.13, Inmate Sexual Assault Investigations Offender Victim Representative (OVR) Training Handouts / PowerPoint Training Documentation of Attempts to Secure the Services of an Outside Victim Advocacy Provider TDCJ Board Policy, BP-01.07, Inspector General Policy Statement TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan, February 2019 Inmate Victim Representatives Training Documents Investigation Documents

Interviews:

Random Staff

PREA Compliance Manager

Inmates Who Reported Sexual Abuse – none at the facility as of the dates of the on-site audit

SAFE / SANE Staff (Exams are conducted at the local hospital. There were no SANE exams conducted in the previous 12 months. These staff were not able to be interviewed)

Findings (By Provision):

115.21 (a): The Safe Prisons PREA Plan, p. 25 specifies that all allegations of sexual abuse will be investigated. AD-16.03, Evidence Handling, and OIG-7.13 and SPPOM 05.01 Attachment G outline the uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. All investigators follow the same evidence protocol no matter the crime. The PAQ indicated that the facility is responsible for conducting administrative investigations while the Office of the Inspector General (OIG) is responsible for conducting administrative and criminal investigations.

Interviews with random staff indicated they are aware of evidence protocol; however, they do not collect evidence, rather the OIG does. They indicated they were aware of how to preserve evidence. A review of the uniform evidence protocol indicates that there is sufficient technical detail to aid responders in obtaining usable physical evidence.

115.21 (b): AD-16.03 and OIG-7.13 outline the uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Per the PAQ as well as the Safe Prisons/PREA Plan this was developed appropriate for youth and was adapted from the DOJ's Office of Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents".

115.21 (c): The Safe Prisons/PREA Plan, page 13-14, section 5 indicates that all inmate victims of sexual abuse shall be offered access to forensic medical examinations at no cost. This is also specified in CMHC G-57.01. The facility does not offer forensic medical examinations on-site. The inmate would be transported to a

	local hospital where the forensic examination is performed by nurses with specialized training. The PAQ indicated that during the previous twelve months, there have been no (0) forensic exams conducted. 115.21 (d): The Safe Prisons/PREA Plan, page 12, outlines the process for offender victim services. The plan indicates that attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim. Additionally, the plan indicates that the Warden shall designate at least two Offender Victim Representatives (OVR) to serve as the TDCJ qualified staff member to provide advocacy services. The facility provided documentation of their efforts to obtain a Memorandum of Understanding with a local provider, however, as of the dates of the audit, there have been no MOUs confirmed between the facility and an outside provider. The facility does have an MOU with the Tralee Crisis Center for Women, Inc., however, the MOU provided expired and the current MOU only covers use of the Tralee Crisis Center as the hotline outside reporting entity. The facility Offender Victim Representatives receive specialized training to serve in this capacity. The training curriculum and documentation of the training for staff victim advocates was provided in the PAQ. Interviews with the inmates and staff indicated the OVR is available to provide advocacy services if needed or requested. Inmates interviewed were aware of this information. Documentation is contained in the investigation files that victim advocates are contacted and offered to the inmate. The interview with the PCM indicated that designated are trained as offender victim representatives which provide victim advocacy and emotional support services to inmates to inmates who have been alleged victims of sexual abuse. 115.21 (e): The Safe Prisons/PREA Plan, page 12, outlines the process for offender victim services. The plan indicates that attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim. Interviews with the inmates and the OVR staff indicated the OVR is available to provide advocacy services during the forensic medical examinations and investigatory interviews if needed or requested. The auditor also reviewed the investigation files. All of these files included documentation that victim advocacy services are offered to the inmates. There were three (3) inmates at the facility during the dates of the on-site audit who had previously reported a sexual abuse. There were no inmates at the facility as of the dates of the on-site audit who had reported a sexual abuse and, therefore, none of these were able to be interviewed.

	115.21 (f): The facility is responsible for conducting administrative investigations while the Office of the Inspector General is responsible for conducting administrative and criminal allegations. The OIG is independent of the agency, however policies including OIG-07.13 and BP 01.07, indicate they are required to comply with all federal PREA standards. 115.21 (g): N/A. The auditor is not required to audit this provision. 115.21 (h): SPPOM 02.02 outlines the requirements for offender victim representatives. Those authorized to serve in this capacity receive specialized training via the Offender Victim Representative Training. The training curriculum was provided as well as documentation that these staff have been trained to provide this service. Based on a review of the PAQ, the policies and procedures, documentation and information from interviews with random staff, the PREA Compliance Manager, and documentation of the OVR training curriculum and staff completion, as well as a review of the investigation files, this standard is determined to be compliant.

115.22	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Administrative Directive AD-16.20, Reporting Incidents to the Office of the Inspector General Investigative Reports / Listing of Facility Alleged Sexual Abuse Allegations TDCJ Safe Prisons / PREA Operations Manual 05.01, Sexual Abuse Response and

Investigation

TBCJ Office of the Inspector General, Operational Procedures Manual OIG-7.13, Inmate Sexual Assault Investigations

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

Board Policy BP-01.07, Inspector General Policy Statement

Interviews:

Agency Head

Investigative Staff

Findings (By Provision):

115.22 (a): AD-16.20, SPPOM 05.01 and the Safe Prisons/PREA Plan, outline the administrative and criminal investigative process. Policies require that all allegations be reported to a staff member which will then be forwarded to a supervisor. TBCJ OIG Policy 7.13 states that all inmate allegations of sexual assault must be conducted in a professional and confidential manner and the investigators will complete a prompt, thorough and objective investigation. AD 16.20 states that the OIG has the primary jurisdiction for investigating criminal offenses occurring on TDCJ property. The OIG is primarily responsible for interactions between the TDCJ and outside law enforcement agencies. The OIG is notified of all allegations of sexual abuse and harassment. If the allegation requires an administrative investigation, the supervisor or Warden will ensure an Administrative Incident Review is completed promptly. All allegations will be forwarded to the OIG for investigation.

The PAQ indicated that there were seven (7) allegations of sexual abuse and sexual harassment that were received within the previous twelve months. All of these resulted in an administrative investigation and none (0) were referred for criminal investigation. The auditor was provided documentation of the investigations for the previous 12 months and reviewed all seven (7) of these investigations.

The interview with the Agency Head indicated that all allegations are taken seriously and are investigated either administratively by a trained staff member at the facility or criminally by the Office of the Inspector General. The interview also indicated all criminal investigators had received specialized investigator training.

	115.22 (b): AD-02.15, AD-16.20 the Safe Prisons PREA Plan and SPPOM 05.01 indicate that the OIG is the primary investigative and law enforcement entity of the TDCJ. The OIG serves as the independent office responsible for conducting investigations in accordance with professional standards related to the field of investigations in a government environment. The policy regarding investigations is published on the agency's website: https://www.tdcj.texas.gov/divisions/oig/index.html. The interview with facility investigators affirmed that the OIG does the criminal investigations and that they work closely with the facilities. The OIG staff do not have on-site offices at this facility. There were no OIG investigators on-site at the facility as of the dates of the on-site audit and, therefore, none were interviewed by the auditor. The auditor two (2) interviewed investigators who conduct administrative investigations. Both of these investigators stated in their interviews that the agency policy does require that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. 115.22 (c): BP-01.07 indicate that the OIG is the primary investigative and law enforcement entity of the TDCJ. The OIG serves as the independent office responsible for conducting investigations in accordance with professional standards related to the field of investigations in a government environment. The policy outlines the responsibilities of the OIG as it relates to investigations. 115.22 (d): N/A. The auditor is not required to audit this provision. 115.22 (e): N/A. The auditor is not required to audit this provision. Based on a review of the PAQ, AD-16.20, SPPOM-05.01, OIG-7.13, AD-02.15, BP-01.07, the Safe Prisons/PREA Plan, the agency's website and information obtained from interviews with the Agency Head and facility investigators, and a review of the investigative files, this standard is determined to be compliant.

115.31	**Employee training**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan Executive Directive PD-29, Sexual Misconduct with Offenders Executive Directive ED-12.10, Training Records and Database Security Memorandum SM-02.25, On the Job Training Program Executive Directive PD-97, Training and Staff Development Safe Prisons / PREA Operations Manual 06.01, Unit Safe Prisons / PREA Program Awareness Training Employee Training – In-service Safe Prisons Employee Training – Pre-service Safe Prisons PREA in Texas -Video Script On the Job Training (OJT) Program Procedures Guide TDCJ – Gender Specificity Training (GST) TDCJ – Turnout Training Documentation of Staff Acknowledgement of Training Interviews: Interview with Random Staff Findings (By Provision): 115.31 (a): PD-29 and the Safe Prisons/PREA Plan, page 33-35 indicate that all staff are required to receive PREA training at least every two years. PD-97, PD-29 and ED-12.10, also cover the required training topics for staff. A review of the PREA training curriculums confirm that the agency trains all employees who may have contact with inmates on the following matters: its zero tolerance policy, how to fulfill their responsibilities under the agency's sexual abuse and sexual harassment policies and procedures, the inmates right to be free from sexual abuse and sexual harassment, the right of the inmate to be free from retaliation for reporting sexual

abuse or sexual harassment, the dynamics of sexual abuse and sexual harassment in a confinement setting, the common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationship with inmates, and how to comply with relevant laws related to mandatory reporting.

A review of a sample of staff training records indicated that 100% of those reviewed received PREA training. Additionally, records indicated that staff received training weekly at shift turnout. The PCM ensures that staff are trained on a different section of PREA monthly. Interviews with random staff confirmed that they had received PREA training within the previous twelve months and that they continuously receive PREA training. The staff were exceptionally knowledgeable on PREA.

115.31 (b): The Safe Prisons/PREA Plan, page 33-35 and SM-02.25, page 16, indicate that the training shall be tailored to the gender of the offenders at the unit of assignment and that the employee shall receive additional training when transferring to a unit with offenders of a different gender. The TDCJ Gender Specificity Training is provided to all staff.as well as the Pre-Service Employee training for Contraband and Searches. In addition, the TDCJ Correctional Training OJT Program is a mandatory program with curriculum-based and hands-on training that will serve as a bridge between Phase 1 will be paired with actual work knowledge and practical skills in a unit environment. The facility houses only male inmates and as such the staff receive training tailored to male inmates.

The PAQ indicated that training is tailored to the gender of inmate at the facility and that employees who are reassigned to facilities with opposite gender are given additional training. A review of a sample of staff training records indicated that 100% of those reviewed received PREA training.

115.31 (c): SPPOM 06.01, Unit Safe Prisons, PREA Program Awareness Training establishes USPPM operational instructions for providing PREA awareness training for staff. This policy states that staff awareness training may take place during, but not limited to: shift change, security and departmental staff meetings, non-security departmental meetings and any additional training sessions or meetings as determined by the Unit Administration. The PAQ indicated that 100% of the staff have been trained in PREA requirements and that they receive PREA training annually. A sample of staff training records indicate that all the staff reviewed received the PREA training. Interviews with random staff confirm that they received training.

115.31 (d): The PAQ indicated that all staff are required to physically sign or

	electronically acknowledge that they received and understood the PREA training. Training courses are approved through the TDCJ training database. Employees are required to enroll and complete courses through this database. If the training is a classroom setting, the trainer of the class or designee is required to ensure the course is entered into the database. Additionally, a supplemental training record is kept for all classroom style training. A review of the training records indicate that all staff sign an acknowledgement of training once completed. Based on a review of the PAQ, the Safe Prisons/PREA Plan, PD-29, ED-12.10, SM-02.25, the PREA Training Curriculums, a review of a sample of staff training records as well as interviews with random staff indicate that this standard is compliant and is rated as exceeds.

115.32	**Volunteer and contractor training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons PREA Plan Texas Tech University Health Sciences Center (TTUHSC), PREA Modules 1, 2, 3, 4 TTUHSC Standard Operating Procedures for Training and Background Clearance Volunteer Services Training Facilitators Guide Windham Training Curriculum Safe Prisons PREA Windham Board Policy 07.56, Prohibited Employee Relationships TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan Operations Manual – Program Awareness Training Executive Directive PD-29, Sexual Misconduct with Offenders TDCJ Volunteer Services, Handbook for Volunteers Executive Directive PD-97, Training and Staff Development

Safe Prisons PREA in Texas – Video Script

UTMB Part 4 PREA Specialized Training

Documentation of Contractor Signed Acknowledgement of Training

Interviews:

Volunteers

Contractors

Findings (By Provision):

115.32 (a): The PAQ indicated that volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures on sexual abuse and sexual harassment. All volunteers and contractors are required to receive the Safe Prisons PREA in Texas training video and receive information from the Volunteer Services Training Program (pages 32-33) as well as information in the volunteer handbook (pages 12-13). PD-29 and the Safe Prisons/ PREA Plan, page 35, describe the required training and indicate that the training is based on the type and level of services provided and the level of contact with offenders. Texas Tech University Health Sciences Center policy 51.03 was provided to the auditor. This policy specifies the PREA training for sexual misconduct for medical staff who are contract staff at the facility. The Windham Training Curriculum was provided to the auditor which specifies the PREA training for the contracted education staff. Windham Board Policy 07.56 was also provided to the auditor which prohibits employee relationships with residents. The PREA training curriculums were provided and reviewed by the auditor and support the requirements provided in the policies and this standard.

The PAQ indicated that one hundred and twenty-six (136) volunteers and contractors (medical, education and college staff) had received PREA training, which is equivalent to 100%. A review of sample training documents for contractors and volunteers indicated that 100% of those reviewed received PREA training. Additionally, the interviews conducted with the contract staff confirmed that they had received PREA training, were aware of the zero-tolerance policy and knew to immediately report to security if they were informed of an allegation. The auditor interviewed two (2) contract staff during the on-site portion of the audit, as well as one (1) volunteer. All of these individuals indicated that they did receive the PREA training.

	115.32 (b): The PAQ indicated that volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures on sexual abuse and sexual harassment. All volunteers and contractors are required to receive the Safe Prisons PREA in Texas training video and receive information from the Volunteer Services Training Program (pages 32-33) as well as the volunteer handbook (pages 12-13). The Windham Training Curriculum was provided to the auditor for review which is the training provided to the contracted education and programs staff. The UTMB Part 4 PREA Specialized Training was also provided to the auditor. This training is provided to contracted medical and mental health staff. Both the volunteer and contractor trainings provide information on the agency's zero tolerance policy and how to report incidents of sexual abuse and sexual harassment. PD-29 and the Safe Prisons/PREA Plan, page 35, describe the required training and indicate that the training is based on the type and level of services provided and the level of contact with offenders. Interviews with contractors indicated that they had received PREA training, were aware of the zero-tolerance policy and knew to immediately report to security if they were informed of an allegation. 115.32 (c): The PAQ and a review of sample training documents for contractors and volunteers indicated that 100% of those reviewed had signed the TDCJ Volunteer Services Acknowledgment of Volunteer Training/Orientation. This is the form which documents that the attendees received and understood the training. Based on a review of the PAQ, the Safe Prisons/PREA Plan, PD-29, the PREA training video transcript, the volunteer handbook, the Volunteer Services Training Program, the Windham training curriculum, the TTUHSC modules and a review of a sample of contractor and volunteer training records as well as interviews with contractors and a volunteer, this standard is determined to be compliant.

115.33	**Inmate education**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:

	Pre-Audit Questionnaire Safe Prisons/PREA Plan Safe Prison/PREA Operations Manual SPPOM 06.02, Offender Sexual Abuse Awareness Training TDCJ Correctional Institutions Division, Intake Procedures 1.10, Initial Orientation Offender Orientation Safe Prisons Video Script – English and Spanish TDCJ Offender Orientation Handbook – English and Spanish. SPPOM 06.02, Attachment Q UTMB Correctional Managed Health Care Policy E-37.5, Interpreter Services Correctional Managed Health Care Policy G-51.01, Offenders with Special Needs Security Memorandum SM-05.50 Qualified Spanish Interpreter Guidelines Safe Prisons / PREA Operations Manual SPPOM 02.03 with Attachments TDCJ Unit Classification Procedure 5.00, Orientation Procedures Unit Specific Safe Prisons PREA Information – English and Spanish Correctional Managed Health Care Policy G-51.5 ASL Interpreter Services Correctional Managed Health Care Policy A-08.03, Referral of Offenders to the Developmental Disabilities Program Documentation of Chain Lists for Incoming Inmates and Corresponding Documentation of their Training Interviews: Intake Staff Random Inmates Site Review Observations: Observations of Intake Area Observations of PREA Signs in English and Spanish Informal Conversations with staff Location of interpretation services

	Informal Conversations with inmates Observation of comprehensive education process Test Processes: How the facility provides necessary PREA information to all confined persons Interpretation Services for LEP Inmates Accessibility of interpretation services Availability of interpretation service Findings (By Provision) 115.33 (a): Intake Procedures 1.10 and the Safe Prisons/PREA Operations Manual 06.02 outline the requirement for inmates to receive PREA education, specifically information on the agencies zero tolerance policy and how to report incidents or suspicion of sexual abuse or sexual harassment. Inmates receive orientation within seven calendar days of arrival and receive five hours of peer education, to include sexual assault awareness. The PAQ indicated that 1767 inmates received information on the zero-tolerance policy and how to report at intake during the previous 12 months. This is equivalent to 100% of inmates who received this information at intake. A review of documentation indicated the TDCJ Offender Orientation Handbook as well as the Safe Prisons/PREA Program brochure included information on the zero-tolerance policy and the reporting methods. Both documents are provided to inmate at intake. A review of a sample of inmate files indicated that 100% of those reviewed had been documented that they received PREA information at intake. During the site review, the auditor observed the intake area and was provided an overview of the intake process. Inmates were provided a handout/brochure and were also asked the risk screening questions during this time. The interview with intake staff indicated that the facility provides inmates information related to the zero-tolerance policy and reporting mechanism via the orientation packet. Random inmates that were interviewed indicated that they received PREA information at the time of intake. Interviews with inmates who are LEP and other

	disabled inmates indicated that they were all provided assistance and written information in in a manner and format that they were able to understand. The facility provides certified interpretation services to inmates who are LEP. If a language other than Spanish is needed, the language interpretation services are utilized, which is generally through the use of the trained staff translators. The operation and use of the language line service was explained and demonstrated to the auditor by medical staff. The written information is also provided in English and in Spanish. Staff assist inmates if they are unable to see or read. Mental Health and education staff assist inmates who may have cognitive or functional disabilities. Interviews were conducted on-site audit with inmates who were blind / low-vision, deaf / hard of hearing as well as inmates who were Limited English Proficient. These inmates indicated they were provided PREA information in a method that they were able to understand. There were no inmates at the facility during the dates of the on-site audit with a physical disability or cognitively impaired. 115.33 (b): The Safe Prisons/PREA Operations Manual 06.02 outlines the requirement for inmates to receive PREA education, specifically the comprehensive education that is provided to the inmates. The manual indicates that the Sexual Abuse/PREA Awareness video will be shown to all offenders within 30 days of arrival into the TDCJ and if the inmate is received at a facility and it is determined that he/she has not seen the video, they are to receive it immediately. A review of the video transcript indicated that inmates were educated on their rights to be free from sexual abuse and sexual harassment and their right to be free from retaliation. The video also goes over the agencies policies and procedures related to prevention, detection and response. The video is in English and Spanish and with closed captioning. Inmates are provided written materials in English and Spanish. The information is also verbally explained. This ensures that all inmates, including those who are deaf or hard of hearing, blind or with low vision, cognitively or functionally disabled, limited English proficient, non-English speaking or have limited reading skills, are all able to understand the information provided. Inmate chain lists were provided to the auditor with signatures from inmates documenting their receipt of the comprehensive education. The auditor requested and received additional documents (Attachment Q) of inmates interviewed on-site. These documents were provided to the auditor and were reviewed and indicated that 100% of those reviewed had received comprehensive PREA education. Interviews with the intake staff and random inmates confirmed that all inmates receive comprehensive PREA education. 115.33 (c): A review of a sample of inmate records indicated that 100% of those sampled received comprehensive PREA education. All inmates that are received by the facility receive PREA training and education. The facility also provided the Unit Specific Safe Prisons PREA Information in English and Spanish which includes the

	names of the executive / administrative staff and their titles as well as information regarding how to report a sexual abuse or sexual harassment and contact information for the TBCJ PREA Ombudsman Office, and outside resources contact information. Interviews with intake staff indicate all inmates receive PREA education. 115.33 (d): The Safe Prisons/PREA Plan, page 20-21 establishes the procedure to provide disabled inmates an equal opportunity to benefit from all the aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Inmates who are deaf or hard of hearing are provided information in American Sign Language (ASL) while inmate who are blind or have an intellectual/ cognitive disability would be read PREA information. The Safe Prisons/PREA Plan, page 20-21, specifies the procedures to ensure meaningful access to all the aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment to inmates who are Limited English Proficient (LEP). The agency has a staff translator list which is utilized by the facility for any inmates who are LEP. They can also utilize the LanguageLine, a service they can call that will translate information between the staff member and LEP inmate. CMHC E-37.5, Interpreter Services was provided as supporting documentation of this process. A review of a sample of LEP inmate files indicated that they received PREA information and they understood the information. The auditor interviewed LEP inmates during the on-site audit. The interviews were conducted through the assistance of a qualified staff interpreter. The inmates interviewed understood the PREA information provided to them. SM-05.50 is the policy which specifies the Qualified Spanish Interpreters Guidelines. During the site review, the PREA signage was observed to be in large text, bright colors and in Spanish. CMHC Policy G-51.01 specifies the policy for offenders with special needs. CMCH Policy G-51.5 is the policy for ASL Interpreter Services. CMHC policy G-51.0 is the policy for Offenders with Special needs such as physical or intellectually disabled inmates. 115.33 (e): Initial intake is completed when the inmate signs the orientation sign-in sheets (SPPOM Attachment Q). Comprehensive PREA education is documented via the offender sexual abuse awareness education sign-in roster. This information is then entered into the offender's individual treatment plan. A review of inmate's files indicate that all inmates have been provided comprehensive PREA education. The facility provided PREA attachment Q and Incoming Chain lists for the 12 months preceding the on-site audit for documentation. All of these had inmate signatures that they had received Offender Sexual Abuse Awareness Education. Additional documentation for inmates who were interviewed during the on-site audit was requested and all of these inmates had signed the Attachment Q as having received

	PREA education. 115.33 (f): The PAQ indicated that information is continuously available through posters, inmate handbooks or other written forms for the inmate population. A review of documentation indicated that the facility had PREA information via the offender orientation handbook, the Safe Prisons/PREA Program Brochure and through PREA signage. During the site review, the auditor observed the PREA signage in each housing unit and in common areas. The signage included the audit notice as well as how to report sexual abuse and sexual harassment. This signage was in common areas and was accessible and consistent. PREA information is also available on the inmate tablets. Informal conversations during the site review with both staff and inmates indicated that they knew about PREA and how to report. Based on a review of the PAQ, the Offender Orientation Handbook in English and Spanish, the Safe Prisons/PREA Plan, UCPM 5.00, IPM 01.10, the Safe Prison/PREA Operations Manual 06.02,, CMHC A-08.03, CMHC E-37.5, CMHC G-51.01, SM-05.50, CMHC G-51.5, the Unit Specific SPP Information in English and Spanish, the training video script, a sample of inmate records, observations made during the site review to include the availability of PREA information via signage and documents as well information obtained during interviews with intake staff and random inmates and inmates with disabilities, and limited English proficiency, this standard is determined to be compliant and is rated as exceeds.

115.34	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Safe Prisons PREA Plan Safe Prisons / PREA Program, Conducting a Thorough Investigation Executive Directive PD-97, Training and Staff Development Training Documentation for Investigators

Administrative Directive AD-16.03, Evidence Handling

Interviews:

Investigative Staff

Findings (By Provision):

115.34 (a): The Safe Prisons PREA Plan, p. 26 states that investigations involving allegations of sexual abuse shall be conducted by investigators who have received special training in sexual abuse investigations pursuant to this policy. PD-97 and AD-16.03 were provided to the auditor which specify the requirements for staff training. The training curriculum, “Conducting a Thorough Investigation” was also provided to the auditor. A review of investigator training records indicated that the facility investigator who completes administrative investigations, and the OIG investigator both received specialized training.

115.34 (b): The TDCJ Safe Prisons PREA Plan requires that all investigators receive mandatory training for sexual assault investigations as well as in-service training specifically related to sexual assaults within the prison facilities. This training is completed through two curriculums: Safe Prisons/PREA Investigator Training and Sexual Assault Investigative Topics. The training curriculums included the following: techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or criminal prosecution. A review of investigator training records indicated that all investigators received specialized investigator training. The facility investigator who completes administrative investigations and the OIG investigator both received specialized training. The facility investigator indicated they received specialized training that all the aforementioned topics were included in the training. The OIG investigator is not permanently assigned to the facility and was not able to be interviewed by the auditor.

115.34 (c): The PAQ indicated that there are twenty-one (21) investigators who completed the required training. A review of the training documents indicated that all of the facility investigators have received specialized training through the agency. The interviews with investigative staff indicated that they received specialized training and it was documented.

115.34 (d): Criminal investigations are conducted by the OIG which is a separate

	entity from TDCJ. Based on a review of the PAQ, the Safe Prisons/PREA Program, PD-97, AD-16.03 a review of investigator training curriculum and training records as well as interviews with investigative staff, this standard is determined to be compliant.

115.35	**Specialized training: Medical and mental health care**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Correctional Managed Health Care Policy Manual CMHCPM C-25.1, Orientation Training for Health Services Staff Correctional Managed Health Care Policy Manual CMHCPM C-19.1, Continuing Education / Staff Development Policy Directive – PD 97, Training and Staff Development TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan UTMB Part 4 PREA Specialized Training TTUHSC PREA Module 3 Medical / Mental Health Specialized Training PowerPoint Specialized Training Documentation for Medical / Mental Health staff Interviews: Medical Staff Mental Health Staff (these staff are not on-site, but provide telehealth) these staff were not able to be interviewed Site Review Observations: Observations during on-site review of physical plant

Findings (By Provision):

115.35 (a): Correctional Managed Health Care Policy Manual C-19.1 and C-25.1, require that all medical and mental health care staff complete an orientation within 90 days. The orientation includes security, classification and health care topics and specifically discusses the detection, assessment and response to offender/victim sexual abuse and sexual harassment. Medical and mental health services are provided through the Texas Tech. The PREA: Part 4 Specialized Training for Medical and Mental Health Staff is required to be completed within the first quarter by all staff and includes the following topics: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and whom to report allegations or suspicion of sexual abuse and sexual harassment. These topics are also covered in the TTUHSC PREA Module 3 training.

PD-97, Training and Staff Development stated that the TDCJ may require employees to attend and satisfactorily complete training, staff development, or educational programs, if the curriculum is related to the employee's duties or prospective duties.

The Safe Prisons PREA Plan specifies that all full and part-time medical and mental health care practitioners who work regularly in TDCJ operated facilities shall be trained in: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The PAQ indicated that the facility has two (2) medical staff and that 100% of these staff received the specialized training. A review of medical training records indicated that all those reviewed received the specialized training. Interviews with medical staff confirmed that they had received the PREA specialized training. Mental Health services are provided via telehealth. These staff are not on-site and were not able to be interviewed.

115.35 (b): This provision does not apply. Forensic exams are not conducted on-site by any of the facility's medical staff. Inmates are transported to a local hospital, where nurses with specialized training complete the forensic medical examination. Interviews with medical staff confirm that they do not perform forensic medical examinations.

	115.35 (c): The PAQ indicated that documentation showing the completion of the training is maintained by the agency. The facility provided documentation of completion of training for all medical and mental health staff at the facility. 115.35 (d): All medical and mental health care staff are considered contractors. The PAQ indicated that contractors who have contact with inmates have been trained on their responsibilities under the facility's policies and procedures on sexual abuse and sexual harassment. The PREA training provided to medical and mental health staff is the initial NEO Training: Safe Prisons/Sexual Assault. Additionally, all contractors are required to view the Safe Prisons/PREA in Texas training video and sign that they understand the information received. A review of sample training documents for medical and mental health care staff indicated that 100% of those reviewed completed and signed the training. Additionally, the interview conducted with medical staff confirmed that they had received PREA training. Based on a review of the PAQ, the Safe Prisons PREA Plan, CMHCPM 25.1, CMHCPM 19.1, PD-97, the PREA training for medical and mental health staff, and medical and mental health care staff training documentation as well as interviews with medical staff, this standard is determined to be compliant.

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire Safe Prisons/PREA Plan Safe Prisons/PREA Operations Manual SPPOM 03.01, Offender Assessment Screening Offender Assessment Screening (Attachment E or E2) Inmate Assessment and Re-Assessment Records Safe Prisons / PREA Automated Network System (SPPANS) Assessments, Users Guide Interviews: Staff Responsible for Risk Screening

Random Inmates

PREA Coordinator

PREA Compliance Manager

Site Review Observations:

Observations of Risk Screening Area

Observations of File Locations and Security

Findings (By Provision):

115.41 (a): The Safe Prisons/PREA Plan, pages 16-17, as well as the SPPOM 03.01, page 1, indicates that all inmates will be assessed during the intake screening for their risk of being sexual abused by other inmates or sexually abusive toward other inmates. During the site review, the auditor observed the intake area where the risk screening occurs. The risk screening is conducted in a private office setting, typically with the PREA Compliance Manager (Safe Prisons Staff). Interviews with random inmates confirm that they were asked questions either the same day or the next day that they arrived at the facility. The interview with the staff responsible for the risk screening indicated that inmates are screened at intake and that the offender assessment screening form is completed. The staff conducted interviews in a manner that fostered comfort and elicited responses from the inmate and utilized the risk screening tool which affirmatively asks inmates about their sexual orientation and gender identity. The staff directly inquired if the inmate identifies as LGBTI and also made subjective determinations about the inmate's perceived status. The risk screening instrument returns a subsequent score or determination of risk of being sexually abused or being sexually abusive.

115.41 (b): The Safe Prisons/PREA Plan, pages 16-17, as well as the SPPOM 03.01, page 1, indicates that all inmates will be assessed during the intake screening for their risk of being sexual abused by other inmates or sexually abusive toward other inmates within 72 hours.

The PAQ indicated that inmates are screened within this timeframe and that 1725 inmates were received at the facility in the previous 12 months whose length of stay was for 72 hours or more. The PAQ indicated that 100% of those whose length of stay was for 72 hours or more received the risk screening within 72 hours. A review of a sample of inmate files confirmed that this screening takes place within 72 hours. The interview with staff responsible for risk screening also noted that the screening takes place within 72 hours of the inmate's arrival at the facility. Interviews on-site with

	inmates also indicated that inmates recalled being asked the screening questions upon their arrival or shortly thereafter. 115.41 (c): The PAQ indicated that the risk screening is conducted using an objective screening instrument. A review of Attachment E and E-2 indicated that inmates answer yes or no questions. These questions are for prior incarceration, current or prior sexual offense convictions, criminal history that is exclusively non-violent, prior institutional sexual victimization or prior institutional violence of sexual abuse, if the inmate is currently or has ever been assigned to safekeeping or protective safekeeping, if the inmate has prior sexual victimization prior to incarceration. The instrument also asks the inmate if they feel at risk from sexual abuse, sexual harassment or other forms of victimization, if they have any developmental disabilities, how they wish to identify, and if they identify as transgender or intersex. The instrument also has a question which asks the observation of the staff whether the inmate displays characteristics or demeanor of the opposite sex or appears gender non-conforming. The screening instrument also has a full page in which the interviewer can indicate their notes regarding the risk screening interview. The Safe Prisons staff perform the risk screening interviews and indicated in the interview with the auditor that the screening tool asks the inmate if they have ever been a victim of sexual assaults or otherwise victimized. The PCM stated that the inmate is asked their name and number and then they go through the questions in the questionnaire. 115.41 (d): A review of the Safe Prisons / PREA 24 hour, E or Special Assessment, E-2 form, indicates that the intake screening considers the following criteria to assess inmates for risk of sexual victimization: whether the inmate has a mental, physical or developmental disability; the age of the inmate; the physical build of the inmate; whether the inmate was previously incarcerated; whether the inmate's criminal history is exclusively nonviolent; whether the inmate has prior convictions for sex offenses against an adult or child; whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether the inmate has previously experienced sexual victimization and the inmate's own perception of vulnerability. Inmates at the facility are not held solely for civil immigration purposes and as such this portion of the screening is not included. Pursuant to Executive Order 14168, portions of this standard referencing transgender, intersex and gender nonconforming inmates, compliance determinations are not made. 115.41 (e): A review of the Safe Prisons / PREA 24-hour, E or Special Assessment, E-2 form confirms that the intake screening considers the following: prior acts of sexual abuse, prior convictions for violent offenses and prior institutional violence or sexual

	abuse known to the facility. Interview with the risk screening staff confirms that these criteria are considered and utilized to determine if the inmate is a potential predator and how to house accordingly. 115.41 (f): SPPOM 03.01, page 1 and 5, indicates that inmates would be reassessed for the inmate's risk of victimization or abusiveness within 30 days from their arrival at the facility. The PAQ indicated that the facility requires inmates to be reassessed and that 1537 inmates were reassessed within 30 days. The numbers indicate that 100% of those inmates whose length of stay was for 30 days or more received a reassessment. An interview with staff responsible for the risk screening indicated that inmates are reassessed between 15 and 30 days. Interview with random inmates indicated that they were asked the risk screening questions typically on the first or second day. A review of a sample of inmate files who had been housed at this facility for a more extended period of time indicated that inmates are being reassessed within the 30-day timeframe. 115.41 (g): SPPOM 03.01, page 5, indicates that inmates would be reassessed for their risk of victimization or abusiveness when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on their risk of sexual victimization or abusiveness. The SPPANS Assessments User Guide was provided in the PAQ which specifies the process and format for conducting the risk assessment and re-assessment. The PAQ indicated that this practice is occurring. An interview with the staff responsible for risk screening indicated that inmates are re-assessed by UCC and also in the event of new information arising or incidents occurring which may indicate a change in the inmate's risk need. Interviews with random inmates indicated that they were asked the risk screening questions at least twice and a few had been asked more than twice. A review of a sample of inmate files indicated that inmates are being reassessed. 115.41 (h): The Safe Prisons/PREA Plan, pages 19-20, as well as the SPPOM 03.01, page 2, indicates that inmates would not be disciplined for refusing to answer the following questions during the risk screening: whether or not the inmate has a mental, physical or developmental disability; whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether or not the inmate previously experienced sexual victimization and the inmate's own perception of vulnerability. The PAQ indicated that inmates are not disciplined for refusing to answer. The interview with the staff responsible for risk screening indicated that inmates are not disciplined for refusing to answer any of the questions in the risk screening. Interviews with random inmates

	confirmed that they have never been disciplined for not answering any screening questions. 115.41 (i): The Safe Prisons/PREA Plan, pages 19-20 as well as the SPPOM 03.01, page 2, as well as the PAQ indicated that the agency has implemented appropriate controls on the dissemination of the screening information to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. The interview with the PREA Compliance Manager indicated that the information obtained during the risk screening is only assessable to staff who need this information as part of their job duties. The Compliance Manager keeps the risk screening in files that are securely locked and staff only use this information to keep inmates safe through assignment of housing, work and programs. The interview with the PREA Coordinator indicated that access to PREA risk assessment information is limited to staff with a legitimate need to know, including unit administration, classification staff, investigators, and appropriate medical and mental health personnel. Based on a review of the PAQ, the Safe Prisons/PREA Plan, SPPOM 03.01, Attachment E, the SPPANS Assessments User Guide, a review of inmate files and information from interviews with the PREA Coordinator, PREA Compliance Manager, staff responsible for conducting the risk screenings and random inmates, this standard is determined to be compliant.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan TDCJ Classification Plan Safe Prisons/PREA Operations Manual SPPOM 03.01, Offender Assessment Screening Administrative Directive AD-04.17, Inmate Housing Assignment Criteria and Procedures Offender Assessment Screening (Attachment E & E-1) Sample of Risk Based Housing Documents – Unit Classifications Review (UCR) Screen Sample of Transgender/Intersex Reassessments Administrative Directive AD-04.18, Offender Job Assignments and Job Descriptions

SPPANS Assessment User Guide
Unit Classification Procedure 4.00, Offender Housing Assignments

Interviews:
Staff Responsible for Risk Screening
PREA Compliance Manager
Random Inmates

Site Review Observations:
Location of Inmate Records.
Housing Assignments of LGBTI Inmates
Shower Area in Housing Units

Findings (By Provision):
115.42 (a): SPPOM 03.01, specifies that the agency uses the information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping separate inmates at high risk of being sexual abused from those at high risk of being sexually abusive. Attachments E, E1 and E2 are the forms utilized in these assessments. UCR screen lists were provided which show the format for the assessments as it appears on the computerized screens. Interviews with the Compliance Manager indicated that the information is used to make housing determinations and job assignment determinations. The interview with the staff responsible for risk screening confirmed that inmates at high risk of victimization would not be authorized work assignments or program/education assignments with inmates at high risk of being sexually abusive. A review of inmate files and of inmate housing and work assignments confirmed that inmates at high risk of victimization and inmates at high risk of being sexually abusive were not housed together, did not work together and did not attend education/programs together.

115.42 (b): The PAQ indicated that the agency makes individualized determinations about how to ensure the safety of each inmate. The TDCJ Classification Plan, p. 13 states that upon intake to the facility, offenders are assigned to appropriate housing according to security needs. Initial housing assignments at intake are made based on the offender’s age, physical size, vulnerable, predatory or abusive characteristics, current offense of record, number of prior confinements, assessments, and other security related characteristics; including information received prior to the inmate’s arrival, or from law enforcement and jail personnel who transported the offender to the facility. P. 10 states that the primary function and objective of the Unit Classification Team (UCC) shall be to classify each offender to ensure to the maximum extent possible, that the safety, security and treatment needs of all offenders are being met, and the safety and security of staff, the prison and the public are maintained. UCPM 4.00, AD-04.17, AD-04.18 and SPPOM 03.01 are also utilized to ensure the facility utilizes individualized determinations to ensure the safety of each inmate. The interview with the staff responsible for the risk screening indicates that all offender risk assessments are reviewed by the Unit Classification Team to

	determine the safest housing, work and program assignments and they would not be placed in the same dorm. The PCM and the Major are involved with all housing of inmates who are at high risk of victimization or high risk of being sexually abusive. 115.42 (c): Per Presidential Executive Order 14168, this standard is no longer applicable. 115.42 (d): Per Presidential Executive Order 14168, this standard is no longer applicable. 115.42 (e): Per Presidential Executive Order 14168, this standard is no longer applicable. 115.42 (f): Per Presidential Executive Order 14168, this standard is no longer applicable. 115.42 (g): Per Presidential Executive Order 14168, this standard is no longer applicable. Based on a review of the PAQ, the Safe Prisons/PREA Plan, SPPOM 03.01 and 03.02, AD-04-17, SPPOM 03.02, UCR screens, a review of inmate housing assignments, and information from interviews with the Compliance Manager, and staff responsible for conducting risk screenings, this standard is determined to be compliant.

115.43	**Protective Custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan SPPOM 05.05, Offender Protection Investigation, Attachment J and K Restrictive Housing Plan Restrictive Housing Plan Attachments, Form I-203A

	Documentation of housing assignments of inmates at high risk of sexual victimization Administrative Directive, AD-04.63, Transient Status Offenders Interviews: Warden Staff Who Supervise Inmates in Segregated Housing Inmates in Segregated Housing for risk of sexual victimization / who allege to have suffered sexual abuse – none during the dates of the on-site audit Site Review Observations: Observation of Housing Units – Restrictive Housing Findings (By Provision): 115.43 (a): The Safe Prisons/PREA Plan, page 18-19, indicates that the agency does not place inmates at high risk for sexual victimization in involuntary restrictive housing unless an assessment of all available alternatives has been made and no alternative is available to separate the inmate from likely abusers. Specifically, inmates who are referred for protective custody are reviewed within seven days, and then every seven days for the first 60 days. After 60 days, the inmate would be reviewed every 30 days. Inmates at the facility are only placed on a restrictive housing status due to high risk of sexual victimization and until an alternate housing can be arranged. The facility provided form SPPOM 05.05, Offender Protection Investigation, attachment J. This form documents the review process to ensure the compliance with policy according to this standard. The Restrictive Housing Plan, p. 11, states that Inmates at high risk for sexual victimization shall not be placed into involuntary segregated housing unless and assessment of all available alternative means of separation has been made, and that there are no available alternative means of separation from likely abusers. According to the PAQ, there have been no inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months. The interview with the warden indicated that any relevant information would be documented if an inmate were placed in restrictive housing and this information is submitted in order to protect the inmate. The inmate would be monitored and reviewed to determine if there was anything further needing to be done. There were no inmates in involuntary segregation for risk of sexual abuse during the on-site audit.

115.43 (b): The Safe Prisons/PREA Plan, page 18-19, indicates that if an inmate was placed in restrictive housing, they would have access to programs, privileges, education and work opportunities to the extent possible and all limitations would be documented with indication of the reason and length of time of limitation. The facility documents the placement and restrictions for inmates on a segregated status. Staff who supervise inmates in segregated housing were interviewed and stated that inmates in segregation have access to programs, however it is modified due to their status. The staff indicated that the housing log is documented with the nature of the programs, education and privileges and if and how it is modified. There were no inmates in segregated housing for risk of sexual victimization or who allege to have suffered sexual abuse during the dates of the on-site audit.

115.43 (c): The Safe Prisons/PREA Plan, page 18-19, indicates that if an inmate was placed in restrictive housing due to risk of victimization, they would only be placed until an alternative means of separation from likely abusers could be arranged, and such assignment would not ordinarily exceed 30 days. The PAQ indicates that in the past 12 months, there were zero (0) inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. A review of the inmates' housing assignment for those who have alleged sexual abuse indicates that they were not held in restrictive housing status for 30 days. The interview with the Warden and staff who supervise inmates in segregated housing indicated that this is standard practice. There were no inmates in segregated housing for risk of sexual victimization or who allege to have suffered sexual abuse during the dates of the on-site audit.

115.43 (d): The Restrictive Housing Review form (I-203A) documents the basis for the concern for the inmates' safety and why no alternative means of separation could be arranged. The PAQ indicates there were zero (0) inmates held in involuntary segregated housing the past 12 months. A review of the inmates' housing assignment for those who have alleged sexual abuse indicates that they were not held in restrictive housing status for 30 days. Many of these inmates were moved to alternate housing within a few days of placement in restrictive housing. The interview with the Warden indicated that this is standard practice.

115.43 (e): The Restrictive Housing Plan, page 11, indicates that if an inmate was placed in restrictive housing due to risk of victimization, they would be reviewed every 30 days to determine if there was a continued need for the inmate to be separated from the general population. Specifically, the Restrictive Housing Plan indicates that inmates who are referred for protective custody are reviewed within seven days, and then every seven days for the first 60 days. After 60 days, the inmate would be reviewed every 30 days. A review of the inmates' housing

	assignment for those who have alleged sexual abuse indicates that they were not held in restrictive housing status for 30 days. The inmates were moved to alternate housing within a few days of placement in restrictive housing. The interview with the Warden indicated that this is standard practice. AD-04.63 addresses transient status offenders and states that offenders who have requested protection or need to be reviewed for reassignment shall be reviewed in accordance with the TDCJ Administrative Segregation Plan and the TDCJ Safe Prisons/ PREA Compliance Plan. These offenders may be assigned to transient housing pending completion of the investigation. If the UCC reclassifies or recommends a unit transfer for an offender identified in this subsection, the offender may remain in transient housing if bed space is not available in the appropriate custody designation or until the offender is transferred. Section IV of this policy also states that Unit classification shall monitor offenders whose custody designation is not available on the unit, or those who cannot be correctly housed due to a lack of bed space on the unit in the assigned custody designation, to ensure the unit level requirements for transfer requests are followed. Based on a review of the PAQ, the Safe Prisons/PREA Plan, SPPOM 05.05, the Restrictive Housing Plan, form I-203A, AD-04.63, observations from the facility site review related to any restrictive housing areas as well as information from the interview with staff who supervise segregated housing and the Warden, this standard is determined to be compliant.

115.51	**Inmate reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan TDCJ Board Policy BP-03.91, Uniform Offender Correspondence Rules Executive Directive ED-02.10, Prison Rape Elimination Act Complaints and Inquiries TDCJ Executive Directive, ED-02.03, Ombudsman Program

	Statement of Fact – Inmate Reporting PREA Investigations Executive Directive PD-29, Sexual Misconduct with Offenders Offender Orientation Handbook – English and Spanish TDCJ Board Policy BP-02.09, Prison Rape Elimination Act Ombudsman Policy Statement TDCJ BP-03.91 Uniform Offender Correspondence Rules TDCJ BP-01.01 Board of Criminal Justice Responsibilities Safe Prisons / PREA Operations Manual, Unit Safe Prisons / PREA Program Awareness Training Interviews: Random Staff Random Inmates PREA Compliance Manager Site Review Observations: Observation of PREA Reporting Signage in all Housings Units Mail drop boxes Record Storage (physical security and electronic security) Processes Tested: Reporting in Writing Access to writing materials Process for Sending / Receiving Mail Reporting Electronically Anonymous reporting Reporting via Phone

Findings (By Provision):

115.51 (a): The Safe Prisons/PREA Plan, page 20-21, outlines the multiple ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. A review of additional documentation to include the offender orientation handbook, BP 03.91 Uniform Offender Correspondence Rules, ED- 02.10, PREA Complaints and Inquiries, The Safe Prisons PREA Plan, SPPOM 02.03 and PREA signage, indicated that there are multiple ways for inmates to report. These reporting mechanisms include: to any employee, contractor or volunteer; on an inmate request (I-60 form), via sick call, via grievance, by calling or writing the PREA Ombudsman or by having any family member or friend report the allegation to the Office of the Inspector General, PREA Ombudsman or any facility staff member. During the site review, it was observed that information pertaining to how to report PREA allegations to the PREA Ombudsman and the OIG was posted in all housing units. The signage was easily read / accessed by persons in the facility. The language in the posting was clear and easy to understand and was specific to services, such as emotional support services, civil immigration and external reporting. The signage details what services are available and for what purposes. The signage is provided in English and Spanish. The signage text, formatting and physical placement accommodate most readers including those of average height, low vision / visually impaired or those physically disabled. The information provided by the signage is not obscured, unreadable by graffiti, or missing due to damage. The information in the signage is accurate and consistent throughout the facility. The audit notices were relevant to the current audit and the contact information was consistence for the service provider / organization name, addresses, phone number. Signage related to how to report sexual abuse and / or sexual harassment (external and internal reporting methods was posted near the phones in the housing units. This information was also observed to be posted in areas where inmates attend programming, work areas and education areas as well as in medical areas.

Informal interviews with inmates at various locations in the facility indicated that they had seen the information posted and knew where the signage was located if they needed to read them. Interviews with a sample of inmates confirm that they are aware of the methods to report sexual abuse and sexual harassment and that they were informed on these methods. Most inmates indicated that they would ask to speak to the PCM, fill out an I-60 or tell a family member or friend. Interviews with random staff confirm that they take all allegations seriously and that inmates have multiple ways (those indicated above) to report sexual abuse and sexual harassment. During the on-site audit, the auditor questioned the process for inmates to obtain writing materials in order for them to submit written notes, grievance forms, etc. Inmates and staff both advised that these materials are distributed regularly and are also available upon request by the inmate to any staff member. Forms for submitting

	a written request are also available to inmates within the housing units without having to ask the staff member for them. Mail drop boxes were observed in the facility at various locations and do not have to be given directly to a staff member in order to be processed. Mail drop boxes were locked and secured and only accessible by designated staff. Mailroom staff at the facility were interviewed and they stated that confidential mail is processed in the same manner as legal mail. The auditor observed that the physical storage area for records and documentation such as risk screening information, medical records, sexual abuse allegations, etc. are secured and not accessible to staff who are not authorized to see such information. Physical records are stored in locked cabinets within locked offices / rooms. Electronic information is secured with password protection and accessible only by the staff member's role access. Informal conversations with medical staff and classification staff confirmed this. 115.51 (b): The Safe Prisons/PREA Plan, page 20-21, indicates that the agency has a way for inmates to report abuse or harassment to a public or private entity that is not part of the agency, and that the entity can immediately forward the report back to the facility for investigation. The facility provided ED-02.03 Ombudsman Program for review. BP-02.09 Board Policy was also provided for review. A review of additional documentation to include the offender orientation handbook and PREA signage confirm the agency provides information and phone number for the outside entity reporting method. The outside entity is the PREA Ombudsman's Office. This office is separate from the Texas Department of Criminal Justice. During the site review, it was observed that information pertaining on how to report PREA allegations to the PREA Ombudsman's Office was posted in all housing units. Inmates can have a third-party call 936-437-5570 or can write to P.O. Box 99, Huntsville, TX 77342. The interview with the PC indicated that the outside entity would receive the allegation and would immediately relay the reported information back to the facility. Board Policy BP-03.91, Uniform Inmate Correspondence states that all incoming and outgoing correspondence, except as otherwise provided in this policy, is subject to delivery, inspection, and rejection in accordance with the following rules. "Special Correspondence" is any mail sent to or from a special correspondent. This includes correspondence from a rape crisis center that possesses a Memorandum of Understanding (MOU) with the TDCJ to provide emotional support to inmates. "Special Correspondence" is also any member of the Texas Board of Criminal Justice, the executive director' the deputy executive director; any division directors, deputy directors; PREA Elimination Act (PREA) ombudsman, or wardens of the TDCJ, and offices of the Inspector General, among others listed in this policy. BP-01.01 Texas Board of Criminal Justice Responsibilities states that the TBCJ appoints an

	ombudsperson, who serves at the pleasure of the TBCJ, to coordinate the TDCJ's efforts to eliminate the occurrence of sexual abuse and sexual harassment in correctional facilities. Interviews with a sample of inmates confirm that they are aware of the outside reporting mechanism and that the information is posted in their housing area. The Correctional Institution PREA Statement of Fact was provided to the auditor which states that the Texas Department of Criminal Justice does not detain individuals solely for civil immigration purposes, but TDCJ does make available foreign consulate general addresses for all foreign nationals. Interviews with random inmates indicated that they were aware that they could report to the Ombudsman's office. Interviews with staff and inmates indicated that the inmates have access to use the phones even when they are in restricted housing. The facility does not currently have a contract with an outside entity to provide emotional support and victim advocacy. 115.51 (c): The Safe Prisons/PREA Plan, page 20-21, notes that staff are required to accept all reports made verbally, in writing, anonymously and from a third party and will promptly document any verbal reports. PD-29, Sexual Misconduct with Offenders and the PAQ indicates that staff accept all reports and that they immediately document any verbal allegations of sexual states that an employee who becomes aware of alleged sexual misconduct shall immediately report such misconduct to their immediate supervisor, warden or department head. A review of additional documentation to include the offender orientation handbook, the PREA Ombudsman brochure and PREA signage indicated inmates could report verbally, in writing, anonymously or through a third party. Documentation was provided in the PAQ of an investigation of alleged inmate sexual abuse in which the alleged inmate victim reported the incident to staff. Staff immediately took action and documented the verbal report. Interviews with a sample of inmates confirm that they are aware of the methods available for reporting. Interviews with a sample of staff indicate they accept all allegations of sexual abuse and sexual harassment and they immediately report any allegation to their supervisor. 115.51 (d): The Safe Prisons/PREA Plan, page 20-21, describes that the agency

	provides a method for staff to privately report sexual abuse and sexual harassment of inmates. PD-29 indicates staff can privately report to the Office of the Inspector General or the PREA Ombudsman's Office. Staff are informed of these policies and procedures in regular monthly and annual trainings. The TDCJ Safe Prisons / PREA Operations Manual / Unit Safe Prisons / PREA Program Awareness Training establishes USPPM operational instructions for providing Safe Prisons / PREA awareness training and education to unit staff. Interviews with a sample of staff indicate that they can privately report sexual abuse and sexual harassment of inmates to any supervisor, to the OIG directly or to the PREA Ombudsman's Office. Based on a review of the PAQ, Safe Prisons/PREA Plan, BP-03.91, ED-02.10, SPPOM 02.03, PD-29, BP – 02.09, BP-01.01, SPPOM 0601, the Statement of Fact, the Offender Orientation Handbook, review of the PREA investigations, PREA signage, observations from the facility site review related to PREA signage, and interviews with the PCM, random inmates and random staff, this standard is determined to be compliant.

115.52	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan TDCJ Administrative Directive AD-03.82, Management of Offender Grievances IGOM 1.04 PREA Allegations TDCJ Offender Grievance Operations Manual OGOM 9.00, Third Party Grievance Correctional Institution Division, Prison Rape Elimination Act / PREA, Statement of Fact OGOM Appendix U – Third Party Preliminary Investigation Form TDCJ Board Policy BP-03.77 – Inmate Grievances

Interviews:

Inmates Who Reported Sexual Abuse – none at the facility during the dates of the on-site audit

Site Review Observations:

Signage (posters, pamphlets, brochures, electronic signage) (how to report, audit notices, civil immigration, access to outside emotional support services, third-party reporting) (accessibility, visibility, accuracy)

Informal conversations with staff and inmates

Testing Processes:

Completion of Third-Party test report

Findings (By Provision):

115.52 (a): The Safe Prisons/PREA Plan, AD-03.82, and IGOM 01.04 are the policies related to inmate grievances. The PAQ indicated that the agency is not exempt from this standard. Board Policy 03.77, Inmate Grievances, states that the TBCJ encourages the resolution of grievances at the lowest possible level. The purpose of the policy is to enable the development, implementation and operation of a grievance program for inmates within the Texas Department of Criminal Justice and to provide appropriate documentation to the courts.

115.52 (b): The Safe Prisons/PREA Plan, pages 21-22, AD-03.82 and IGOM 01.04 outline the grievance process for allegations of sexual abuse and sexual harassment. Specifically, these policies state that the agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse and that the agency does not require an inmate to use the informal grievance process, or attempt to resolve with staff, an alleged incident of sexual abuse.

115.52 (c): The Safe Prisons/PREA Plan, pages 21-22 and AD-03.82 outline the grievance process for allegations of sexual abuse and sexual harassment. AD-03.82 states that the inmate may submit a grievance without submitting it to the staff member who is the subject of the complaint and grievances will not be referred to

	staff members who are the subject of the complaint. 115.52 (d): The Safe Prisons/PREA Plan, pages 21-22, AD-03.82 and IGOM 01.04 outline the grievance process for allegations of sexual abuse and sexual harassment. The Statement of Fact from the Resolution Support Manager states that the agency considers all sexual abuse grievances emergency grievances and are not eligible for extensions and must be completed within the 40-day time frame. The inmate must be notified in writing of the extension and provide a date by which the decision will be made. The policy also indicates that if the inmate does not receive a response within the allotted timeframe, the inmate will consider the absence of a response to be a denial. The PAQ indicated that there has been one (1) grievance of sexual abuse filed in the previous twelve months. This grievance reached final decision within 40 days of being filed. A Statement of Fact provided by the facility provided an overview of the grievance process and commented that the agency considers all sexual abuse grievances emergency grievances and are not eligible for extensions and shall be completed within the 40-day time limit. There were no inmates who had reported sexual abuse that were still at the facility as of the dates of the on-site audit, therefore, they were not able to be interviewed by the auditor. Per UCC policy and the documents of the UCC meeting with the inmates, they were notified in writing of the outcome of the investigation. The documentation of this is also in the investigation files. 115.52 (e): AD-03.82, OGOM Appendix U and OGOM 9.00, outlines the grievance process for third party allegations of sexual abuse and sexual harassment. Specifically, that third parties are permitted to assist inmates in filing request for administrative remedies for sexual abuse and are permitted to file such request on behalf of the inmate. In addition, it states that if a third-party files a report on behalf of an inmate that the agency may require the alleged victim to agree with the request prior to filing and if the inmate declines will require the inmate to complete a sworn affidavit stating he does not want the grievance to proceed. There were no sexual abuse grievances that had been submitted in the previous twelve months which were filed by a third party. The auditor observed during the site review that signage was posted in visitation areas that can be accessed by family members, friends, advocates and attorneys. The information was also observed by the auditor on the agency’s public website. The same information is provided to the inmates in signage in the housing units and

	various locations throughout the facility as well as in the inmate handbook. The auditor submitted a test report as a third-party report via directions on the public website to the PREA Ombudsman with instructions to submit evidence of having received the test report that the auditor submitted. The response was received from the Ombudsman's Office that the test report was received. 115.52 (f): The Safe Prisons/PREA Plan, pages 21-22, outlines the grievance process for allegations of sexual abuse and sexual harassment. Specifically, that the agency provides inmates the opportunity to file an emergency grievance alleging substantial risk of imminent sexual abuse and the grievance will be addressed immediately. The policy indicates that that an initial response will be provided within 48 hours and that a final decision will be provided within five calendar days by the housing Captain. This information is also contained in AD-03.82, Management of Inmate Grievances and IGOM 1.04. The final decision will document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The PAQ indicated that there were no (0) emergency grievances alleging substantial risk of imminent sexual abuse filed in the previous twelve months. 115.52 (g): The Safe Prisons/PREA Plan, page 22, indicates that the inmate may be disciplined for filing a grievance in bad faith. The PAQ indicated that there were zero (0) inmate grievances that alleging sexual abuse that resulted in disciplinary action in the previous twelve months. A review of the grievance log and sample grievances indicated that zero (0) sexual abuse grievances had been submitted in the previous twelve months and none resulted in disciplinary action against the inmate for having filed the grievance in bad faith. Based on a review of the PAQ, the Safe Prisons/PREA Plan, AD-03.82, IGOM 01.04, BP-03.77, the Statement of Fact, OGOM 9.00, OGOM Appendix U, and the information on the TDCJ website for filing a third-party report, this standard is determined to be compliant.

115.53	**Inmate access to outside confidential support services**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan Board Policy BP-03.91, Uniform Inmate Correspondence TDCJ, Safe Prisons / PREA Program Unit Information Pamphlet (English and Spanish) Texas Association Against Sexual Assault (TAASA) Rape Advocacy Centers Directory Statement of Fact TDCJ Safe Prisons / PREA Operations Manual SPPOM 02.02– Offender Victim Representative Documentation of Attempts to Request Partnerships with Advocate Groups Interviews: Random Inmates Inmates Who Reported Sexual Abuse Site Review Observations: Observations of Signage Informal Conversations with staff and inmates Testing of Processes: Process for Sending / Receiving Mail Findings (By Provision): 115.53 (a): The Safe Prisons/PREA Plan, page 12, indicates that the agency provides access to outside victim advocates for emotional support related to sexual abuse by giving inmates mailing addresses and telephone numbers to victim advocates or rape crisis organizations and enables reasonable communication in as confidential manner as possible. BP 03.91 specifies the process for inmates to submit “special correspondence” to contact outside entities.

SPPOM 02.02 states that the TDCJ will make available to an offender victim of sexual assault a victim advocate from a rape crisis center. When an advocate from a rape crisis center is not available to provide emotional support advocacy services following an allegation of sexual assault, the TDCJ shall upon request of the offender victim, provide an OVR to support the offender victim through the forensic medical examination process and investigatory interviews.

The PAQ indicated that inmates were provided mailing addresses and phone numbers and that they enabled reasonable communication with these services in as confidential a manner as possible. This information is included in the Unit Safe Prisons PREA Information and in the Texas Association Against Sexual Assault (TAASA) Directory which is available in the Rights of Crime Victims posting. The TAASA Directory is available to the offenders in the facility library. A review of the TDCJ, Safe Prisons / PREA Program Unit Information, indicates that PREA information and reporting directions are provided which includes mailing addresses and telephone numbers. The inmates can also contact the PREA Ombudsman's office. Information to contact the Ombudsman's Office is included in this pamphlet.

Interviews with random inmates indicated that they were familiar with the process of having emotional support services and that the facility offered them. Most inmates indicated they believed that they would be provided this information if they asked and they thought it would be confidential. Interviews with inmates who had reported a sexual abuse indicated that they were not given information such as mailing addresses and phone numbers for outside services. Inmates at this facility are given victim advocacy services by trained facility staff. The facility has been unable to obtain services from an outside source. Inmates are not detained solely for civil immigration purposes at the facility, therefore that part of the provision does not apply.

Signage was observed by the auditor throughout the facility and specifically in the housing units by the inmate phones. This signage contained information regarding the audit notice, civil immigration information and hot to report sexual abuse and sexual harassment and other relevant PREA information. The signage was legible and, in both English, and Spanish. All of this information is also available on the inmate tablets.

The facility provided a statement of fact in reference to this standard which specifies that TDCJ does not detain individuals solely for immigration purposes, but TDCJ does make available foreign consulate addresses for all foreign nationals. BP-03.91 Uniform

	Offender Correspondence Rules states that the TDCJ facilitates written contact between inmates and outside parties. 115.53 (b): The Safe Prisons/PREA Plan, page 13, confirms that prior to giving inmates access to outside support services that they are informed of the extent which communication will be monitored as well as any mandatory reporting rules and limits to confidentially. Board Policy 03.91 states that TDCJ facilitates written contact between inmates and outside parties. All incoming and outgoing correspondence, except as otherwise provided in this policy, is subject to delivery, inspection, and rejection in accordance with the following rules. Page 3 specifies the extent of monitoring with rape crisis centers with an MOU and other relevant agencies as well as Special and Media Correspondence) (p. 9). Interviews with random inmates indicated that they were familiar with the process of obtaining emotional support services. Most inmates indicated they believed that they would be provided this information if they asked and they thought it would be confidential. There were no inmates at the facility during the dates of the on-site audit who had reported a sexual abuse. 115.53 (c): The facility does not currently have an MOU with a local advocacy center, but has provided documentation of its efforts to do so. The Statement of Fact provided states that the agency/facility has made multiple attempts to obtain an agreement with an advocate from a rape crisis center, however no agreement has been reached. Documentation of email sent soliciting services was provided in the PAQ. Based on a review of the PAQ, the Safe Prison/PREA Plan, BP-03.91, SPPOM 02.02, the Statement of Fact, the PREA Unit Information, emails soliciting victim advocacy services, observations from the facility site review related to PREA signage and posted information and interviews with inmates and staff, this standard is determined to be compliant.

115.54	**Third-party reporting**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	Documents: Pre-Audit Questionnaire The Safe Prisons PREA Plan PREA Signage TDCJ General Information Guide for Families of Offenders Agency Website TDCJ Executive Directive ED-02.10, Prison Rape Elimination Act Complaints and Inquiries Offender Orientation Handbook (English and Spanish) TDCJ Board Policy BP-02.09, Prison Rape Elimination Act Ombudsman Policy Statement Site Review Observations: Signage Informal Conversations with Staff and inmates Testing Processes: Third Party Report (via agency website) Findings (By Provision): 115.54 (a): ED-02.10 states that the TDCJ establishes this policy as the guidelines for reporting complaints and inquiries to the PREA Ombudsman from elected officials, the public, and inmates pertaining to allegations of sexual abuse and sexual harassment, and related to TDCJ initiatives. BP-02.09 states that it is the policy of the Texas Board of Criminal Justice (TBCJ) that the PREA Ombudsman shall coordinate the TDCJ efforts to comply with the PREA standards in all of its correctional and community and residential facilities.

	The PAQ indicated that the agency has a method to receive third-party reports of sexual abuse and sexual harassment and publicly distributes that information on how to report sexual abuse and sexual harassment on behalf of an inmate. A review of the general information guide for families of offenders and PREA posters as well as the agency's website (www.tdcj.texas.gov/tbcj/prea.html or www.tdcj.texas.gov/ks_offender.html) confirms that third parties can report on behalf of an inmate. Third parties can report via letters, emails and phone calls to the PREA Ombudsman's office, the OIG or reporting directly to the facility Warden. This information is also contained in the Offender Orientation Handbook. Inmates can submit an I-60 as a written method of reporting as a third-party. The auditor sent a test email to the PREA Ombudsman's Office via the link on the public website which was received and verified.

115.61	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan, February 2019 TDCJ Executive Directive PD-29, Sexual Misconduct with Offenders TDCJ Administrative Directive AD-16.20, Reporting Incidents / Crimes to the Office of the Inspector General TDCJ Safe Prisons / PREA Operations Manual 05.01, Sexual Abuse Response and Investigation Sample of reports to investigators Interviews: Random Staff Medical and Mental Health Staff (mental health staff are telehealth and not on-site) Warden

PREA Coordinator

Testing Processes:

Staff Reporting

Findings (By Provision):

115.61 (a): The Safe Prisons/PREA Plan, page 23, and PD-29, pages 4-5, outline the staff and agency reporting duties. Specifically, it requires all staff to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment, retaliation against any inmate or staff that reported such incidents and any staff neglect or violation of responsibility that may have contributed to an incident. Employees are to report to their immediate supervisor, warden or department head, the employee's second level supervisor if the person allegedly conducting the misconduct is the employee's immediate supervisor, a unit OIG investigator, the Records Management Office, OIG Investigations Division, or the PREA Ombudsman Office. Supervisors who receive notification of alleged sexual misconduct are to report such misconduct to the warden or department head, a unit OIG investigator, Records Management Office, and / or the PREA Ombudsman. The Warden, Department Head or PREA Ombudsman shall report any alleged sexual misconduct to the OIG. AD-16.20 states that administrative violations, criminal offenses and emergency incidents which, when occurring on TDCJ property or affecting the TDCJ's authorized interests are reportable to the OIG.

The PAQ along with interviews with random staff confirm that they take all allegations seriously and that they know they are required and would report any knowledge, suspicion or information regarding an incident of sexual abuse and sexual harassment. Interviews also confirmed they would report retaliation or any staff neglect related to these incident types. Staff interviews indicated that they all felt comfortable reporting to their supervisors directly.

115.61 (b): The Safe Prisons/PREA Plan, page 23 describes that staff will not reveal any information related to an incident of sexual abuse other than as necessary for treatment, investigation and other security decisions. SPPOM 05.01 states that staff shall not reveal an information related to a sexual abuse report to anyone other than designated supervisors or officials to the extent necessary, as specified in TDCJ policy, to make treatment, investigation and other security and management decisions.

	Interviews with random staff confirm that they would immediately report the information to their supervisor. Staff indicated this would be the extent of distributing information unless they were required to complete an Inter-Office Communication (IOC) which is a written report of the incident. 115.61 (c): The Safe Prisons/PREA Plan, page 23, indicates that medical and mental health staff are required to report sexual abuse as described in section (a) and that they are required to inform inmates of their duty to report and limits to confidentiality at the initiation of services. Interviews with medical staff confirm that they would immediately report any allegation of sexual abuse that occurred within a confinement setting. Medical staff indicated they are required to inform inmates of the limits of confidentiality. Mental health staff are telehealth and are not on site at the facility. 115.61 (d): In the interview with the Agency PREA Coordinator, she stated that agency policy requires that all allegations of sexual abuse and sexual harassment, regardless of how they are received, be immediately reported through established reporting procedures and forwarded to the appropriate authority for review and investigations. When the alleged victim is under the age of 18 or is considered a vulnerable adult under applicable law, required notifications are also made to the appropriate protective services authority, as applicable. The Warden indicated in the interview that the facility had not had any of these reports but if they did, the Department of Family and Protective Services would be notified. 115.61 (e): The warden stated in the interview that all allegations of sexual abuse and sexual harassment, including third party and anonymous reports would be reported to the Office of the Inspector General and confirmed that this is the practice. A review of investigative reports indicate that all allegations are reported to the Office of the Inspector General. Based on a review of the PAQ, the Safe Prisons/PREA Plan, SPPOM 05.01, PD-29, AD-16.20, a sample of reports to investigators and interviews with medical, the PREA Coordinator and the Warden, this standard is determined to be compliant.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Safe Prisons / PREA Operations Manual SPPOM 02.04, Intervention Practices TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan, February 2019 TDCJ Safe Prisons / PREA Operations Manual SPPIM 05.03, Time Frames Associated with Offender Protection Investigations TDCJ Safe Prisons / PREA Operations Manual SPPOM 05.01 Sexual Abuse Response and Investigation Interviews: Agency Head Warden Random Staff Findings (By Provision): 115.62 (a): SPPOM 02.04 and the Safe Prisons PREA Plan indicate that when the agency learns that an inmate is subject to substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. SPPOM 05.03 states that the Offender Protection Investigation (OPI) shall be completed within 12 hours from the date and time staff became aware of the offender's need for protection. SPPOM 05.01 specifies the coordinated effort between unit security staff, the Office of the Inspector General (OIG), medical and mental health services, and victim advocates (where available) and the Offender Victim Representative (OVR). The PAQ noted that in the past 12 months, there were no (0) inmates who were determined to be at risk of imminent sexual abuse. Interviews with staff indicated that if an inmate is having issues with other inmates, that the facility would make appropriate housing changes, if necessary. The

	interviews with the Agency Head and Warden indicated that any inmate at risk would be removed from the situation immediately and an investigation would commence. The offender's job assignment, housing assignment and programming assignments would be reviewed. The inmate may be moved to a different dorm, moved to a new facility or be placed in safekeeping status. Interviews with random staff indicated that they would immediately remove the inmate from the situation. Based on a review of the PAQ, SPPOM 05.03, SPPOM 05.01, SPPOM 02.04, the Safe Prisons PREA Plan, and interviews with the Agency Head, Warden and random staff, this standard is determined to be compliant.

115.63	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Safe Prisons / PREA Operations Manual SPPOM 04.01, Reporting Allegations of Sexual Abuse to Other Confinement Agencies TDCJ Safe Prisons / PREA Operations Manual SPPOM 04.02, Receiving Allegations of Sexual Abuse from an Outside Agency Interviews: Agency Head Warden Findings (By Provision): 115.63 (a). The Safe Prisons/PREA Plan, pages 24-25 and SPPOM 04.01, describe the requirements for reporting to other confinement facilities. Specifically, it requires that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Unit Safe Prisons PREA Manager (USPPM) will notify the Safe

	Prisons PREA Management Office (SPPMO), who will then notify the appropriate office of the outside agency. The PAQ indicated that during the previous twelve months, the facility had no (0) inmates report that they were abused while confined at another facility. 115.63 (b): The Safe Prisons/PREA Plan, pages 24-25 require that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the SPPMO will notify the head of the facility where the alleged abuse occurred within 72 hours. 115.63 (c): The Safe Prisons/PREA Plan, pages 24-25 require that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the SPPMO will notify the head of the facility where the alleged abuse occurred and documentation will be retained that such notification occurred. 115.63 (d): The Safe Prisons/PREA Plan, page 25, and SPPOM 04.02, indicates that if the facility receives information from another agency head that an inmate alleges, they were sexually abuse while housed at the facility, the allegation will be reported to the PREA Ombudsman and the Office of the Inspector General. The PAQ indicated that during the previous twelve months, the facility has had no (0) allegations of sexual abuse from other facilities. These were investigated in accordance with the PREA standards. The interviews with the Agency Head and Warden indicated that allegations received from other agencies would be reported to the PREA Ombudsman and the Office of the Inspector General. Based on a review of the PAQ, the Safe Prisons/PREA Plan, SPPOM 04.01, 04.02, a review of the notifications and the investigations, and interviews with the Agency Head and Warden, this standard is determined to be compliant.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Safe Prisons / PREA Operations Manual SPPOM 05.01, Sexual Abuse Response and Investigation TDCJ Administrative Directive AD-16.03, Evidence Handling Investigation Files Interviews: Security Staff and Non-Security Staff First Responders Inmates Who Reported Sexual Abuse – none at the facility as of the dates of the on-site audit. Random Staff Findings (By Provision): 115.64 (a). The Safe Prisons/PREA Plan, pages 26-27 and the SPPOM 05.01, describes staff first responder duties. Specifically, it requires that upon learning that an inmate was sexually abused, the first security staff member will: separate the alleged victim and the alleged perpetrator; preserve and protect any crime scene until evidence can be collected and if the abuse occurred within a time period that still allows for the collection of physical evidence request that the alleged victim and ensure that the alleged perpetrator not take any action to destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. AD 16.03 states that when circumstances reveal that a criminal act may have occurred, the TDCJ shall ensure the implementation of evidence handling and crime scene protection/preservation procedures in accordance with this directive. All employees shall take those steps necessary to protect life and property as well as to provide for the identification, protection, preservation, and collection of physical evidence in such a manner as to maintain its integrity.

	The PAQ indicated that during the previous twelve months, there have been six (6) allegations of sexual abuse. All random staff interviewed were well versed first responder duties. All staff who were interviewed indicated they would separate the alleged victim and alleged perpetrator, would secure the crime scene and would instruct inmates not to destroy any physical evidence. In the past 12 months there were four (4) allegations in which staff were notified within a time period that still allowed for the collection of physical evidence. Security staff interviewed stated that in the event of an allegation, if they were the first to respond, they would preserve and protect the scene until appropriate steps could be taken to collect any evidence. These staff also stated they would request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. There were no inmates remaining at the facility as of the dates of the on-site audit who had reported a sexual abuse in the previous 12 months, therefore, none were able to be interviewed by the auditor. A review of the investigations indicated that staff, took appropriate actions in response to the allegations. 115.64 (b): The Safe Prisons/PREA Plan, pages 26-27 and the SPPOM 05.01 describe staff first responder duties. Specifically, it requires that non-security staff first responders advise the alleged victim and ensure the alleged perpetrator not take any action to destroy physical evidence, if it occurred within a time period that still allows for the collection of physical evidence. Staff would tell the inmate not to wash, brush their teeth, change their clothes, urinate, defecate, smoke, drink or eat. The PAQ indicated that during the previous twelve months, there were three (3) instances in which the first responder was a non-security staff. Interviews with first responders (security and non-security) confirm that they are aware of their first responder duties. Staff were very well versed on first responder duties. A review of the investigation files documented the actions taken by the staff. The actions for notifications and directives to the inmates involved were in compliance with this standard. Based on a review of the PAQ, the Safe Prisons/PREA Plan, the SPPOM 05.01, AD 16.03, investigation files and interviews with staff, this standard is determined to be compliant.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Safe Prisons / PREA Program, Sexual Abuse Coordinated Response Plans Interviews: Warden Findings (By Provision): 115.65 (a): The PAQ indicated that the facility has a written plan that coordinates actions taken in response to incidents of sexual abuse among staff first responders, medical and mental health, investigators and facility leaders. A review of the coordinated response shows that all areas are accounted for in the plan. Each section includes the actions that each person and/or department is responsible for and includes information on how all areas work together to respond to allegations. The Warden confirmed that the facility has a plan and that it includes all the required components. Based on a review of the PAQ, the coordinated response and the interview with the Warden, this standard is determined to be compliant.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	This standard was audited at the agency level as reflected in the audit report dated 10/7/2026.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Safe Prisons / PREA Operations Manual SPPOM 02.04, Intervention Practices TDCJ Safe Prisons / PREA Operations Manual SPPOM 5.08, 90-Day Monitoring for Retaliation Attachment N.S. 90 Day Monitoring Form (Staff) Attachment N.O. 90 Day Monitoring Form (Inmates) TDCJ Executive Directive, PD-29, Sexual Misconduct with Inmates Interviews: Agency Head Warden Designated Staff Member Charged with Monitoring Retaliation Inmates Who Reported Sexual Abuse – none at the facility as of the dates of the on-site audit. Inmates in Segregated Housing for risk of sexual victimization / who allege to have suffered sexual abuse – none at the facility as of the dates of the on-site audit Findings (By Provision): 115.67 (a): The Safe Prisons/PREA Plan, page 24, and SPPOM 02.04 outline the agency's method for protection against retaliation. It addresses that the agency will protect all inmates and staff who report sexual abuse and sexual harassment from retaliation by other inmates and staff and has designated staff responsible for monitoring. PD-29 states that the TDCJ has zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of inmates. An employee is prohibited from subjecting another employee, inmate or other individual to harassment, or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with

	inmates. The PAQ indicated that the facility has a policy and that the Major is responsible for monitoring retaliation. 115.67 (b): The Safe Prisons/PREA Plan outlines the agency's protection against retaliation. It addresses the multiple measures that the facility will take to protect inmates and staff. These measures include housing changes or unit transfers, removal of the alleged staff abuser from contact with the victim work changes for inmates, placement in safe keeping or protective custody, if necessary and emotional support services. A review of incident reports indicated that there have been no allegations of retaliation nor any reported fear of retaliation. All inmates at the facility are reviewed every 30 days and at that time can also indicate if they have any concerns related to retaliation. Inmates who reported sexual abuse were no longer housed at the facility as of the dates of the on-site audit and were not able to be interviewed by the auditor. A review of the monitoring documentation indicates that contact was made with inmates who had reported sexual abuse / sexual harassment. It appears that multiple protection measures are in place and are reviewed by monitoring staff. Interviews with the Warden and designated staff members charged with monitoring retaliation indicated that contact is made with inmates and staff who have reported a sexual abuse and that the monitoring is conducted each month for at least 90 days and that protective measures would be taken if an inmate or staff member expressed fear of retaliation. All staff interviewed indicated they would make any necessary housing changes and/or work changes and would follow up with any administrative action on staff such as shift change, removal or discipline. The interview with Agency Head indicated that the agency does employ a variety of measures to ensure inmates are protected from abusers. 115.67 (c): The Safe Prisons/PREA Plan, page 24, SPPOM 02.04 and the SPPOM 05.08, outline the agency's protection against retaliation. It addresses that the facility will monitor the inmate for at least 90 days following a report of sexual abuse and will monitor the conduct and treatment of the inmate or staff to see if there are any changes that may suggest possible retaliation and will act promptly to remedy any

	retaliation. The policy requires that the process include monitoring any inmate disciplinary reports, housing or program changes or any negative performance reviews or reassignments of staff. The policy indicates that monitoring can extend beyond 90 days if the initial monitoring indicates a need to continue. Attachments N.S. and N.O. are utilized by staff to monitoring staff and inmates. The PAQ indicated that the facility monitors for retaliation and that it does so for at least 90 days. The PAQ indicated that there had been no instances of retaliation in the previous twelve months. All inmates at the facility are reviewed every 30 days and at that time can also indicate if they have any concerns related to retaliation. Interviews with the Agency Head and staff responsible for monitoring retaliation all indicated that protective measures would be taken if an inmate or staff member expressed fear of retaliation. All staff interviewed indicated they would make any necessary housing changes and would follow up with any administrative action on staff such as removal or discipline. Monitoring staff indicated that they would review the inmate for at least 90 days and would check the inmate's disciplinary reports, housing change and program changes. Monitoring staff also indicated they have not had to monitor staff in the previous twelve months but if they did, they would check performance reviews and post assignment changes. 115.67 (d): The Safe Prisons/PREA Plan, page 24 and the SPPOM 05.08, outlines the agency's protection against retaliation. It addresses that the facility will monitor the inmate for at least 90 days following a report of sexual abuse and will conduct a minimum of three status checks. The agency has a policy that outlines the procedure and does have two forms that are utilized, Attachment N.O. and Attachment N.S. to ensure all requirements are met and staff and inmates are safe from retaliation. Additionally, as previously stated all inmates at the facility are reviewed every 30 days and at that time can also indicate if they have any concerns related to retaliation. Interviews with staff responsible for monitoring indicated that they review the inmate for at least 90 days and would perform a minimum of three in person status checks. A review of the files for inmate's who have made a sexual abuse or harassment allegations indicated that the retaliation reviews were completed for the inmate files reviewed. 115.67 (e): The Safe Prisons/PREA Plan, page 24 and the SPPOM 05.08, outlines the agency's protection against retaliation. It addresses that the facility will take appropriate measures to protect any individual who cooperates with an investigation or expresses fear of retaliation. Interviews with the Agency Head and Warden indicated that they would employ the same protective measures as stated previously related to staff and inmates to include, housing changes, administrative action,

	removal of staff and/or disciplinary action. 115.67 (f): N/A. Auditor is not required to audit this provision. Based on a review of the PAQ, Safe Prisons/PREA Plan, PD-29, SPPOM 02.04, SPPOM 05.08, Attachment N.O., Attachment N.S. and interviews with the Agency Head, Warden, staff charged with monitoring for retaliation, and a review of the completed retaliation monitoring forms, this standard is determined to be compliant.

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Administrative Directive AD-04.63, Transient Status Offenders TDCJ, Restrictive Housing Plan with Attachments TDCJ Protective Safe Keeping Plan with Attachments Interviews: Warden Staff who Supervise Inmates in Segregated Housing Inmates in Segregated Housing (for risk of sexual victimization / who allege to have suffered sexual abuse) – none at the facility as of the dates of the on-site audit Site Review Observations: Observations of the Restrictive Housing Unit

Findings (By Provision):

115.68 (a): The Safe Prisons/PREA Plan, page 18-19, the Protective Safekeeping Plan and the Restrictive Housing Plan, indicate that any use of restrictive housing to protect an inmate who alleged to have suffered sexual abuse will not be involuntary unless an assessment of all available alternatives has been made and no alternative is available to separate the inmate from likely abusers. Additionally, required justifications related to the concerns for safety and no alternatives are required to be documented and the inmate is required to be reviewed every 30 days.

AD-04.63 states that if there is bed space in the appropriate custody designation and designated housing on the unit but the offender cannot be appropriately housed due to pending classification reviews, the offender may be assigned to transient housing. If the Unit Classification Committee (UCC) reclassifies or recommends a unit transfer for an offender, the offender may remain in transient housing if bed space is not available in the appropriate custody designation or until the offender is transferred. Transfer requests made as a result of an offender safety issue shall follow the procedures set forth in the TDCJ Safe Prisons / PREA Compliance Plan.

The PAQ indicated that no (0) inmates who alleged sexual abuse were placed in involuntarily restrictive housing for zero to 24 hours or longer than 30 days. During the site review, it was observed that the restrictive housing unit did not house any inmates who alleged sexual abuse or harassment.

The interview with the Warden indicated that inmates who alleged sexual abuse would never be placed in restrictive housing longer than necessary to secure alternate housing. The interview with staff who supervise inmates in restrictive housing indicated this, as well. There were no inmates in segregated housing for risk of sexual victimization or who alleged to have suffered sexual abuse during the dates of the on-site audit and, therefore, there were none that were interviewed.

Based on a review of the PAQ, the Safe Prisons/PREA Plan, the Protective Safekeeping Plan, the Restrictive Housing Plan and the interview with the Warden and staff who supervise inmates in restrictive housing, this standard is determined to be compliant.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TBCJ Office of the Inspector General, Policy 7.13, Inmate Sexual Assault Investigations TDCJ Administrative Directive AD-02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents TDCJ Records Retention Schedule 7th Edition TDCJ Executive Directive ED-02.29, Records Management Investigation Reports TDCJ Administrative Directive, AD 16.20, Reporting Incidents / Crimes to the Office of the Inspector General Interviews: Investigative Staff Inmates Who Reported Sexual Abuse – none at the facility as of the dates of the on-site audit Warden PREA Coordinator PREA Compliance Manager Investigative Staff Site Review Observations: Record Storage: Physical and Electronic Informal Conversations with staff Findings (By Provision):

	115.71 (a): The Safe Prisons/PREA Plan, page 25, section A4, AD-02.15 and OIG Policy 7.13 state that all allegations of sexual abuse and sexual harassment will be conducted promptly, thoroughly and objectively. AD 16.20 defines the administrative violations, criminal offenses, and emergency incidents which, when occurring on TDCJ property of affecting the TDCJ's authorized interests, are reportable to the OIG. The sexual abuse and sexual harassment investigations from the previous 12 months were reviewed. The interview with the facility investigators confirmed that all investigations (administrative and criminal) are completed promptly, thoroughly and objectively. 115.71 (b): The PAQ indicated that all facility investigators who complete PREA investigations have received special training in sexual abuse investigations. A review of training documents confirmed that all investigators have received specialized training. The interview with the investigative staff confirmed that the OIG investigators receive the NIC investigator training as well as training through the Texas Rangers. The facility investigators received specialized training through the agency. 115.71 (c): Policy 7.13 describes the criminal and administrative investigation process. Specifically, it discusses evidence collection including physical evidence, DNA, electronic monitoring data and interviews. It also indicates that they will review prior complaints and reports of sexual abuse involving the alleged perpetrator. The investigations for the facility in the previous 12 months were reviewed and included physical and electronic evidence collection as well as interviews. The interviews with investigative staff confirmed that an investigator would respond immediately, would require the victim to be taken for a "rape kit" and would ensure the crime scene was secured until evidence collection initiated. The crime scene would be photographed and the alleged victim, alleged perpetrator and any witnesses would be interviewed. 115.71 (d): The Safe Prisons/PREA Plan, page 28, describes the criminal and administrative investigation process. Specifically, it states that when evidence appears to support criminal prosecution that the agency will conduct compelled interviews only after consulting with prosecutors. The OIG investigator would be the investigator who would consult with prosecutors prior to conducting any compelled interviews. OIG staff do not maintain permanent offices at the facility and were not on-site during the dates of the audit. These staff, therefore, were not able to be interviewed by the auditor. 115.71 (e): The Safe Prisons/PREA Plan, pages 28-29, describes the criminal and

	administrative investigation process. Specifically, it states that the credibility of the alleged victim, perpetrator and/or witness will be assessed on an individual basis and will not be determined based on the individual's status as an inmate or staff member. Additionally, it indicates that inmates would not be required to submit to a polygraph examination or any other truth-telling device as a condition for proceeding with the investigation. The interviews with facility investigators confirmed that the agency does not utilize polygraph tests or any other truth-telling devices on inmates who allege sexual abuse. Interviews with inmates who reported a sexual abuse indicated that they were not subjected to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation. 115.71 (f): The Safe Prisons/PREA Plan, page 29, describes the criminal and administrative investigation process. Specifically, it states that all administrative investigations will include an effort to determine whether staff actions or failure to act contributed to the abuse and shall be documented in a written report that includes a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings. The PAQ and interviews with investigative staff confirm that administrative investigations would be documented in written reports and include information related to the allegation, victim and suspect interviews, witness interviews, video evidence, if applicable, description of any physical evidence, if applicable, and investigative facts and findings. A review of the investigations indicates that all of the aforementioned information is included as part of the investigative file. Investigation files are kept in a locked filing cabinet in a locked office. Electronic files have safeguards which only allow access by specific staff who have authorization based on their positions in the agency. 115.71 (g): All of the sexual abuse and sexual harassment allegations are reported to the OIG. A review of the facility investigative reports indicated that criminal investigations were documented in written reports and included information related to the allegation, victim and suspect interviews, witness interviews, video evidence, if applicable, description of any physical evidence, if applicable, and investigative facts and findings. 115.71 (h): The PAQ indicated that substantiated allegations of conduct that appear to be criminal will be referred for prosecution. The PAQ indicated that there have been zero (0) allegations referred for prosecution since the last PREA audit. Interviews with investigators indicated that cases would be referred for prosecution when there are substantiated allegations of conduct which appear to be criminal.

115.71 (i): The Safe Prisons/PREA Plan, page 31, describes the criminal and administrative investigation process. Specifically, it indicates that all written reports will be retained per the retention schedule. The Retention Schedule is in a document from September, 2020. All administrative investigations are retained seven years after closure or after termination while criminal investigations are permanently retained. ED 02.29, Records Management states that the TDCJ develops, implements, and monitors an agency-wide records management program that complies with all state and federal laws while safeguarding all state records, both paper and electronic, through effective records management, retention, storage, protection and disposition. The TDCJ continually addresses the use of new technologies for records management while ensuring transparency by open and verifiable documentation of the processes and activities carried out in the management of all state records.

115.71 (j): The Safe Prisons/PREA Plan, page 29, describes the criminal and administrative investigation process. Specifically, it indicates that the departure of the alleged victim or alleged abuser from employment or custody of the agency does not provide a basis for terminating an investigation. The interviews with investigators confirmed that all investigations are completed no matter if staff leave/resign or if inmates depart the facility or agency's custody.

115.71 (k): N/A. The auditor is not required to audit this provision.

115.71 (l): The Office of the Inspector General is responsible for conducting investigations at all facilities within the Texas Department of Criminal Justice. The OIG policies were reviewed and are included throughout this report. The OIG complies with all PREA policies and procedures related to investigations. Interviews with the Warden, PREA Compliance Manager and Investigative Staff indicated that the agency and the OIG have a great relationship and that information is shared from the OIG through their liaison (PC). The interview with the PC stated that the Office of Inspector General (OIG) provides monthly reports regarding the status of open investigations. In addition, quarterly meetings are held to discuss investigative updates and other PREA-related matters.

Based on a review of the PAQ, the Safe Prisons/PREA Plan, OIG-7.13 AD-02.15, ED-02.29, AD 16.20, the record retention schedule, investigative reports, training records and information from interviews with the Agency Head, Warden, PREA Coordinator, PREA Compliance Manager, and investigative staff, this standard is determined to be compliant.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan Investigation Reports Training Slides – Safe Prisons/PREA Program: Conducting a Thorough Investigation Interviews: Investigative Staff Findings (By Provision): 115.72 (a): The Safe Prisons/PREA Plan, page 28, describes the administrative investigation process. Specifically, it indicates that the agency does not impose no higher standard than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. A review of the investigations indicates that the evidence used in making a determination are included and that the standard of preponderance of evidence is utilized. The PAQ provided the training slides used in conducting training and the standard for substantiating a case was included in this training. Interviews with investigative staff confirmed that all administrative investigations only require a preponderance of evidence to make a substantiated finding. Based on a review of the PAQ, the Safe Prisons/PREA Plan, the training slides, reviews of investigations and information from the interviews with investigative staff, this standard is determined to be compliant.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan Safe Prisons/PREA Operations Manual SPPOM 05.05 with Attachment J TDCJ Safe Prisons / PREA Operations Manual SPPOM 05.10, Reporting Sexual Abuse Criminal Case Status to Offenders TDCJ Safe Prisons / PREA Program, Staff-on-Offender Sexual Abuse Investigative Worksheet, SPPOM 05.11, Attachment F Investigations with Inmate Notification OIG Notification Memorandums List of Alleged Sexual Abuse Investigations with Outcomes Safe Prisons PREA Automated Network System (SPPANS) User Guide Interviews: Warden Investigative Staff Inmates Who Reported Sexual Abuse – none at the facility as of the dates of the on-site audit Findings (By Provision): 115.73 (a): The Safe Prisons/PREA Plan, page 30, SPPOM 05.05 and SPPOM 05.10 describes the process for reporting investigative information to inmates. Specifically, it states that following an investigation into an inmate's sexual abuse allegation, the facility will inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The PAQ indicated that there were seven (7) criminal or administrative investigations completed within the previous twelve months. The notifications from these investigations were reviewed. The documents reviewed indicated that the inmates were notified of the outcome of the investigation. The inmate signs the acknowledgement of receipt. The interviews with the Warden and the Investigative

	staff confirmed that inmates are informed of the outcome of the investigation into their allegation. Documentation of the notifications was noted in the investigation files of these inmates. There were no inmates at the facility as of the dates of the on-site audit who had reported a sexual abuse, therefore, none were able to be interviewed by the auditor. 115.73 (b): The OIG is responsible for conducting all criminal and certain administrative investigations for the agency. The OIG is an independent agency but works very closely with the TDCJ. The OIG provides the outcome of the investigation to PREA Coordinator who in turn provides the memo to the facilities to notify the inmate. The PAQ indicated that there were seven (7) investigations conducted by the OIG within the previous twelve months. 115.73 (c): The Safe Prisons/PREA Plan, page 27 and SPPOM 05.11 describes the process for reporting investigative information to inmates. Specifically, it states that following an investigation into an inmate's sexual abuse allegation against a staff member, the agency will inform the inmate as to whether the staff member is no longer posted within the inmates unit, the staff member is no longer employed at the facility, if the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. The facility informs the inmates of the outcome of their investigation. Documentation of this is noted in the investigation files. 115.73 (d): The Safe Prisons/PREA Plan, page 27, SPPOM 05.05 and SPPOM 05.10, page 1, describes the process for reporting investigative information to inmates. Specifically, it states that following an investigation into an inmate's sexual abuse allegation by another inmate, the agency will inform the inmate as to whether the alleged abuser has been indicted on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The investigation files were reviewed for the sexual abuse allegations and included the inmate notifications. The OIG notifications were included in the PAQ and reviewed by the auditor. None of these investigations resulted in an indictment or conviction

	on a charge related to sexual abuse. 115.73 (e): The Safe Prisons/PREA Plan, page 28, and SPPOM 05.05 describes the process for reporting investigative information to inmates. Specifically, it states that all notifications or attempted notification would be documented. The investigations which include the notifications to the inmate are documented in the SPPANS system. The SPPANS User manual which includes the screens used for this purpose was included in the PAQ. The PAQ indicated that there were seven (7) notifications made during the previous 12 months and all of them were documented. The OIG notifications are in addition to the facility notifications. The documents reviewed indicated that the inmates were notified of the outcome of the investigation. 115.73 (f): N/A. The auditor is not required to audit this provision. Based on a review of the PAQ, Safe Prisons/PREA Plan, the SPPANs User Guide, SPPOM 05.05, SPPOM 05.10, SPPOM 05.11, investigative files, the OIG notification memorandums, the list of sexual abuse allegations with outcomes, notifications and information from interviews with the Warden and investigative staff, this standard is determined to be compliant.

115.76	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Executive Directive PD-22, General Rules of Conduct and Disciplinary Action Guidelines for Employees

TDCJ Executive Directive PD-29, Sexual Misconduct with Offenders

TDCJ Administrative Directive AD-16.20, Reporting Incidents / Crimes to the Office of the Inspector General

Findings (By Provision):

115.76 (a): The Safe Prisons/PREA Plan, page 31, PD-29 and PD-22, pages 42, 49, 52 and 54, describes the process for disciplinary sanctions against staff. Specifically, they indicate that staff are subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies.

115.76 (b): The Safe Prisons/PREA Plan, page 39, and PD-22 indicates that termination will be the presumptive disciplinary sanction for staff who engage in the sexual abuse.

The PAQ indicated that there were no (0) staff members who violated the agency sexual abuse or sexual harassment policies in the previous 12 months. There were no staff who were terminated or who resigned prior to termination in the previous 12 months of the audit for violating sexual abuse or sexual harassment policies.

115.76 (c): The Safe Prisons/PREA Plan, page 39, PD-22 and PD-29 describes the process for disciplinary sanctions against staff. Specifically, it illustrates that disciplinary sanctions for violations of the agency’s sexual abuse and sexual harassment policies shall be commensurate with the nature and circumstances of the act, the staff member’s disciplinary history and the sanctions imposed for comparable offense by other staff members with similar histories.

The PAQ indicated that there were no (0) staff members who violated the agency sexual abuse or sexual harassment policies in the previous 12 months. There were no staff who were terminated or who resigned prior to termination in the previous 12 months of the audit for violating sexual abuse or sexual harassment policies.

115.76 (d): The Safe Prisons/PREA Plan, page 39, and PD-29 indicates that staff who are terminated for violating the sexual abuse or sexual harassment policies, or staff who resign prior to being terminated, will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. AD 16.20 specifies the policy and defines the administrative violations, criminal offenses and emergency incidents which, when occurring on TDCJ property or affecting the TDCJ’s

	authorized interests, are reportable to the OIG. The PAQ indicated that there were no (0) staff members who were terminated or resigned prior to termination for violation of the sexual abuse and sexual harassment policies in the 12 months preceding the audit. Based on a review of the PAQ, the Safe Prisons/PREA Plan, PD-22, PD-29 and AD 16.20, this standard is determined to be compliant.

115.77	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Executive Directive PD-29, Sexual Misconduct with Offenders Interviews: Warden Findings (By Provision): 115.77 (a): The Safe Prisons/PREA Plan, pages 39-40, PD-29, page 6, and PD-29 describe the process for corrective action for volunteers and contractors. Specifically, it states that any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and will be reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies. The PAQ indicated that within the previous twelve months there have been no contractors or volunteers who have been reported to law enforcement or relevant licensing bodies and there have been no contractors or volunteers who were subjects

	of investigations of sexual abuse or sexual harassment of inmates. 115.77 (b): PD-29, page 6 and the PAQ indicated that the agency takes remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of sexual abuse or sexual harassment policies. The interview with the Warden indicated that any violation of the sexual abuse and sexual harassment policies would result in the volunteer or contractor having their access to the facility immediately revoked. Additionally, their supervisor or organization would be contacted to report the misconduct and the allegation would be reported and investigated. Based on a review of the PAQ, Safe Prisons/PREA Plan, PD-29 and information from the interview with the Warden, this standard is determined to be compliant.

115.78	**Disciplinary sanctions for inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan TDCJ Correctional Institutions Division, ED-03.76, Offender Disciplinary Procedures TDCJ Correctional Institutions Division, Disciplinary Rules and Procedures for Offenders, English and Spanish Interviews: Warden Medical Staff (Mental Health is telehealth and the staff are not on-site at the facility, therefore Mental Health Staff were not interviewed by the auditor) Findings (By Provision): 115.78 (a): The Safe Prisons/PREA Plan, page 31 ED-03.76, and the Disciplinary Rules and Procedures for Offenders, describes the disciplinary process for inmates.

	Specifically, these policies state that inmates will be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a finding of guilt from a criminal investigation. The PAQ indicated there have been six (6) administrative findings of inmate-on-inmate sexual abuse and no (0) criminal findings of guilt for inmate-on-inmate abuse within the previous twelve months. 115.78 (b): The Safe Prisons/PREA Plan, page 31, describes the disciplinary process for inmates. Specifically, it indicates that the sanctions will be commensurate with the nature and circumstances of the abuse committed, the inmates' disciplinary history and sanctions imposed for comparable offenses by inmates with similar histories. The interview with the Warden indicated that the inmate abuser would be disciplined and would be subject to a loss of privileges as well as subject to criminal charges, if applicable. 115.78 (c): The Safe Prisons/PREA Plan, page 31 and ED-03.76 describe the disciplinary process for inmates. Specifically, these policies state that the disciplinary process will consider whether the inmate's mental illness or mental disability contributed to the behavior when determining what sanctions, if any, should be imposed. The interview with the Warden indicated that the inmate abuser would be disciplined and would be subject to a loss of privileges as well as subject to criminal charges, if applicable. Prior to any discipline the inmate would be seen by mental health and the mental health staff would complete a form indicating if the inmate's mental health contributed to the actions. 115.78 (d): The Safe Prisons/PREA Plan, page 31, describes the disciplinary process for inmates. Specifically, it states that the agency will offer therapy, counseling and other interventions to correct underlying reasons or motivations for the abuse and will consider whether to require the abuser to participate in these interventions as a condition of access to programming and other benefits. Interviews with medical staff indicated that they do offer therapy, counseling and other services designed to address and correct underlying issues, but they do not require the inmate participation as a condition of access to programming and other benefits. 115.78 (e): The Safe Prisons/PREA Plan, page 31, ED-03.76, and the Disciplinary Rules and Procedures for Offenders describe the disciplinary process for inmates. Specifically, these policies state that the agency may discipline an inmate for sexual contact with staff only upon finding that the staff member did not consent. There

	have been no instances where inmates have been disciplined for sexual contact with staff. 115.78 (f): The Safe Prisons/PREA Plan, page 31, describes the disciplinary process for inmates. Specifically, it indicates that inmates will not be disciplined for falsely reporting an incident or lying if the sexual abuse allegation is made in good faith based upon reasonable belief that the alleged conduct occurred. There have been no instances where inmates have been disciplined for falsely reporting an incident of sexual abuse or sexual harassment. 115.78 (g): The Safe Prisons/PREA Plan, page 31, and the Disciplinary Rules and Procedures for Offenders describe the disciplinary process for inmates. Specifically, these policies state that inmates are prohibited from all sexual activity and as such can be disciplined. Consensual sexual activity does not constitute a PREA allegation. Based on a review of the PAQ, the Safe Prisons/PREA Plan, Disciplinary Rules and Procedures for Offenders, ED-03.76 and information from interviews with the Warden and medical staff, this standard is determined to be compliant.

115.81	**Medical and mental health screenings; history of sexual abuse**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan Correctional Managed Health Care Policy Manual CMHCPM G-57.1, Sexual Assault / Sexual Abuse Correctional Managed Health Care Policy Manual CMHCPM E-35.2, Mental Health Evaluation Correctional Managed Health Care Policy Manual CMHCPM E-35.1, Mental Health Appraisal for Incoming Offenders Correctional Managed Health Care Policy Manual CMHCPM H-61.1, Confidentiality and

	Release of Protected Health Information TDCJ Safe Prisons / PREA Program 03.01, Attachment E, Offender Assessment Screening TDCJ Safe Prisons / PREA Program, Attachment E-1, Offender Assessment Screening Safe Prisons / PREA Automated Network System (SPPANS) Assessments, User Guide List of Inmates That Disclosed Victimization During Risk Screening with Intake Date, Screening Date and Medical / Mental Health Referral Date Interviews: Staff Responsible for Risk Screening Medical and Mental Health Staff (Mental Health Staff are telehealth and not on-site at the facility, therefore, they were not interviewed by the auditor) Inmates who Disclosed Sexual Victimization at Risk Screening Site Review Observations: Observations of Risk Screening Area Record Storage: Physical and Electronic Informal conversations with staff Findings (By Provision): 115.81 (a): The Safe Prisons/PREA Plan, pages 17-18 describe medical and mental health screenings related to sexual abuse. Specifically, it states that inmates who indicate during the risk screening that they have experience prior sexual victimization will be offered a follow up with medical or mental health within fourteen days of the screening. Documents were provided in the PAQ which reference and support this standard. These documents include: SPPANS Assessments User Guide, SPPOM 03.01, Attachment E and E1, CMHC Policy E-35.1, CMHC Policy E-5.2 and SPPOM 03.01 Attachment for Medical / Mental Health Referral. The PAQ indicated that 100% of those inmates who reported prior victimization were seen within fourteen days by medical or mental health. The PAQ also indicated that medical and mental health maintain documents related to compliance with these services. A review of medical and mental health files for inmates identified who

	disclosed prior sexual victimization revealed that inmates were seen by mental health, typically within a week. A list of inmates that disclosed victimization was provided to the auditor which also indicates the inmates date of intake, date of risk screening and date of referral to medical / mental health. Interviews with staff responsible for the risk screening, indicated that after the inmate discloses prior victimization, they are seen by mental health within fourteen days. Interviews with inmates who disclosed sexual victimization at risk screening indicated that they were referred to mental health within a week or so after the risk screening. A review of the relevant MH documents indicates that these inmates were referred and seen by mental health staff within the required 14 days. 115.81 (b): The Safe Prisons/PREA Plan, pages 17-18 and CMHCPM E-35.2 describes medical and mental health screenings related to sexual abuse. Specifically, it states that inmates who indicate during the risk screening that they have previously perpetrated sexual abuse will be offered a follow up with medical or mental health within fourteen days of the screening. The PAQ indicated that 100% of those inmates who had previously perpetrated sexual abuse, as indicating during the screening, were offered a follow-up meeting with a mental health practitioner and this meeting is offered and held within 14 days of the intake screening. The PAQ also indicated that medical and mental health maintain documents related to compliance with these services. During the site review, it was observed that mental health staff maintain secondary medical materials in the form of electronic health records in the medical department. 115.81 (c): N/A. This facility is not a jail. 115.81 (d): The Safe Prisons/PREA Plan, pages 19-20, CMHC G-57.1, CMHC E-35.2 and CMHC E-35.1 describe medical and mental health screenings related to sexual abuse. Specifically, these policies state that information related to sexual victimization or abusiveness that occurred in an institutional setting is not limited to medical and mental health staff but rather other staff, as necessary, to make housing, program, safety and security decisions. The PREA Compliance Manager and the Major were the main staff who have access to this information. During the site review, the auditor observed the area where the risk screening is conducted. The screening is conducted in a private office setting. 115.81 (e): The Safe Prisons/PREA Plan, pages 19-20, CMHC G-57.1, and CMHC H-61.1 describe medical and mental health screenings related to sexual abuse. Specifically, these policies state that medical and mental health are staff are required to obtain

	informed consent from inmates prior to reporting information about prior sexual victimization that did not occur within an institutional setting, unless the inmate was under 18. Interviews with medical staff indicate that they obtain informed consent prior to reporting, that they disclose their duty to report and that they have not had any instances of this in the previous twelve months. Based on a review of the PAQ, Safe Prisons/PREA Plan, CMHC G-57.1, CMHC E35.2, CMHC 35.1, CMHC H-61.1, medical and mental health documents, the list of inmates who reported prior sexual victimization and information from interviews with staff who perform the risk screening, medical staff and inmates who disclosed victimization during the risk screening, this standard is determined to be compliant.

115.82	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan Correctional Managed Health Care Policy Manual CMHCPM G-57.1, Sexual Assault / Sexual Abuse Medical Notes Interviews: Medical and Mental Health Staff (Mental Health is telehealth at the facility and staff are not on-site and were not able to be interviewed by the auditor) Inmates Who Reported Sexual Abuse (none at the facility as of the dates of the on-site audit) Security Staff and Non-Security Staff First Responders

Site Review Observations:

Observations of Medical and Mental Health Areas

Findings (By Provision):

115.82 (a): CMHCPM G-57.1 describes inmates' access to emergency medical and mental health treatment. Specifically, it states that inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services as determined by the medical and mental health practitioners.

The PAQ indicated that medical and mental health maintain secondary materials documenting the timeliness of services. During the site review, the auditor noted that the medical area consisted of an emergency room type area as well as an exam room. The mental health services are telehealth and are offered in a private office to conduct the sessions. All areas were private and allowed for adequate confidentiality. Interviews with medical and staff confirm that inmates receive timely services, typically immediately, based on the nature of the allegation, but ultimately within 24 hours. There were no inmates at the facility as of the dates of the on-site audit who had reported a sexual abuse, and therefore, none were able to be interviewed by the auditor.

115.82 (b): CMHCPM G-57.1 and the PAQ indicated that if no qualified medical or mental health practitioners were on duty at the time of a report of recent abuse, that security staff first responders would take the preliminary steps to protect the victim and notify the appropriate medical and mental health services. Policy indicates that the inmate would be transported to the nearest hospital emergency room that had medical staff qualified to conduct forensic medical examinations. The interviews with first responders indicated the inmate would be immediately separated and would remain with the staff member.

115.82 (c): The Safe Prisons/PREA Plan, page 13 and CMHCPM G-57.1, describe inmates' access to emergency medical and mental health treatment. Specifically, they indicate that inmate victims of sexual abuse receive timely access to emergency contraception and sexually transmitted infection prophylaxis. When the inmate is transferred to the local hospital, medical and mental health care at the facility determine if these services were already provided at the hospital and if they were not, they are provided at the facility upon the inmates return. Interviews with medical and mental health care staff confirm that inmates receive timely information about access to sexual transmitted infection prophylaxis. This is a male facility so they are not offered access to emergency contraception. There were no inmates at the facility as of the dates of the on-site audit who had reported a sexual abuse, and therefore,

	none were able to interviewed by the auditor. 115.82 (d): The Safe Prisons/PREA Plan, page 13, and CMHCPM G-57.1 describes inmate access to emergency medical and mental health treatment. Specifically, it states that inmate victims of sexual abuse will receive treatment services without financial cost and regardless whether the victim names the alleged abuser or cooperates with any investigation. Interviews with medical staff indicated that these inmates were not charged for any services they received. Based on a review of the PAQ, the Safe Prisons/PREA Plan, Correctional Managed Health Care Policy Manual G-57.1, review of medical notes and information from interviews with first responders, and medical staff, this standard is determined to be compliant.

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons / PREA Plan Correctional Managed Health Care Policy Manual CMHC G-57.01, Sexual Assault / Sexual Abuse Correctional Managed Health Care Policy Manual E-35.1, Mental Health Appraisal for Incoming Offenders Correctional Managed Health Care Policy Manual E-35.2, Mental Health Evaluation Correctional Managed Health Care Policy Manual E-32.01, Receiving, Transfer, and Continuity of Care Screening Documentation Demonstrating Evaluations of Inmate-on-Inmate Abusers Interviews:

Medical and Mental Health Staff (Mental Health is provided via telehealth, therefore staff were not on-site and unable to be interviewed by the auditor)

Inmates Who Reported Sexual Abuse (none were remaining at the facility as of the dates of the on-site audit)

Security Staff and Non-Security Staff First Responders

Site Review Observations:

Observations of Medical Treatment Areas

Findings (By Provision):

115.83 (a): The Safe Prisons/PREA Plan, page 14, CMHCPM G-57.01 and CMHCPM E-32.01, describe ongoing medical and mental health care for sexual abuse victims and abusers. Specifically, they state that the agency will offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility. During the site review, the auditor noted that the medical area consisted of an emergency room type area as well as multiple exam rooms. The mental health area consisted of an office where telehealth sessions are conducted. All areas were private and allowed for adequate confidentiality.

115.83 (b): The Safe Prisons/PREA Plan, page 14 and CMHCPM E-44.1, describes ongoing medical and mental health care for sexual abuse victims and abusers. Specifically, they state that evaluations and treatments of such victims will include follow up services, treatment plans, and when necessary, referrals for continued care following transfer or release from custody. CMHCPM E-44.1 describes services for those inmates being released from the agency's custody. Interviews with medical and mental health care staff confirmed that follow up services would be offered. A few of the services include assessment, individual counseling and follow-up counseling. Interviews with inmates who had reported a sexual abuse or sexual harassment at the facility indicated that medical and mental health staff discussed follow-up services and treatment plans as well as if referrals for continued care were necessary.

115.83 (c): The Safe Prisons/PREA Plan, page 14, describes ongoing medical and mental health care for sexual abuse victims and abusers. Specifically, it states that medical and mental health services will be consistent with the community level of care. All medical and mental health staff are required to have the appropriate credentials and licensures. The facility utilizes the local hospital for forensic medical

	examinations. Interviews with medical staff confirm that the services they provide are consistent with the community level of care. 115.83 (d): The Safe Prisons/PREA Plan, page 14, indicates female offenders who have been sexually victimized while incarcerated are offered pregnancy tests. However, this provision does not apply as the facility does not house female offenders. 115.83 (e): The Safe Prisons/PREA Plan, page 14, indicates female offenders who become pregnant due to sexual victimization while incarcerated will receive timely and comprehensive information and access to pregnancy related medical services. However, this provision does not apply as the facility does not house female offenders. 115.83 (f): The Safe Prisons/PREA Plan, page 14 and CMHCPM E-32.01 and CMCHPM G-57.01, describe ongoing medical and mental health care for sexual abuse victims and abusers. Specifically, it states that victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate. These policies indicate that all offender victims will be offered test and treatment for syphilis, gonorrhea, HIV and Hepatitis B. There were no inmates remaining at the facility as of the dates of the on-site audit who had reported a sexual abuse, therefore, none were able to be interviewed by the auditor. 115.83 (g): The Safe Prisons/PREA Plan, page 1, CMHCPM E-32.01 and CMHCPM G-57.01 describes inmates' access to emergency medical and mental health treatment. Specifically, it states that inmate victims of sexual abuse will receive treatment services without financial cost and regardless whether the victim names the alleged abuser or cooperates with any investigation. Interviews with inmates who had reported a sexual abuse at the facility indicated that they were not required to pay for any treatment related to the incident. 115.83 (h): The Safe Prisons/PREA Plan, page 14, CMHCPM E-35.1 and 35.2 indicate that a mental health evaluation of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse and treatment will be offered when deemed appropriate in accordance with policy. Interviews with medical and mental health staff confirm that offender-on-offender abusers would be offered mental health services within this time frame.

	Based on a review of the PAQ, the Safe Prisons/PREA Plan, Correctional Managed Health Care Policy Manual G-57.1, CMHCPM 35.1, CMHCPM 35.2, CMHCPM 32.01, the documentation of mental health evaluation of inmate-on-inmate abusers, and information from interviews with staff first responders, and medical staff, this standard is determined to be compliant.

115.86	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Pre-Audit Questionnaire TDCJ Correctional Institutions Division, Safe Prisons/PREA Plan TDCJ Administrative Directive AD-02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents Safe Prisons PREA Automated Network System (SPPANS) User Guide Investigation Files OIG List Interviews: Warden PREA Compliance Manager Incident Review Team Findings (By Provision): 115.86 (a): The Safe Prisons/PREA Plan, page 32, and AD-02.15 outline information related to sexual abuse incident reviews. Specifically, it states that the facility will conduct sexual abuse incident reviews of every sexual abuse investigation, except for those allegations that are deemed to be unfounded.

	The PAQ indicated that there were three (3) reviews which were completed within the previous twelve months. These reviews are generated in the SPPANS system. The SPPANS User Guide was provided to the auditor and reviewed. The investigation files were provided to the auditor which contained the sexual abuse incident reviews. 115.86 (b): AD-02.15, outlines information related to sexual abuse incident reviews. Specifically, it states that the facility will conduct an administrative incident review of all sexual abuse allegations. The review is required to be forwarded to the appropriate Regional Director within ten days after being reported. The PAQ indicated that three (3) reviews were completed within the previous twelve months. These reviews were provided to the auditor and were noted to have been completed within 30 days of the conclusion of the investigations. 115.86 (c): The Safe Prisons/PREA Plan, page 32, outlines information related to sexual abuse incident reviews. Specifically, it states that the review team will consists of upper management officials, with input from line supervisors, investigators and medical and mental health. The interview with the Warden confirmed that these reviews are being completed and they include upper management officials. A review of the investigative files indicated that incident reviews are conducted and they include upper management officials to include the Warden, Assistant Warden and the Captain, as well as the Safe Prisons PREA Manager. 115.86 (d): The administrative incident review form outlines information required to be completed related to sexual abuse incident reviews. Specifically, it includes: consider whether the allegation or investigation indicates a need to change policy or practice; examination of the area where the incident allegedly occurred to assess whether there were any physical barriers; assessing the staffing levels; assess video monitoring technology and prepare a report of its findings to include any recommendations for improvement. The Warden or supervisor submits this report to the Regional Director within ten days and to the Agency Head within 20 days. Interviews with the Warden, PCM and incident review team member confirmed that these reviews are being completed and they include all the required elements. Interviews indicated that the team will adjust the staffing if necessary. Additionally, interviews indicated that any recommendations would be made and implemented that would benefit the facility and would alleviate the incident from occurring again.

	Per Executive Order 14168, portions of the standard are not reviewed for compliance (provision 2). 115.86 (e): The Safe Prisons/PREA Plan, page 32, outlines information related to sexual abuse incident reviews. Specifically, it states that the agency will implement the recommendations for improvement or document the reasons for not doing so. A review of the administrative incident review form indicated that a section exists for recommendations and corrective action. A review by the auditor of the completed Incident Reviews indicated that the facility does implement recommendations for improvement or documents its reasons for not doing so. Based on a review of the PAQ, Safe Prisons/PREA Plan, Administrative Directives AD-02.15, the SPPANS User Guide, completed Administrative Incident Review forms and information from interviews with the Warden, the PCM and a member of the sexual abuse incident review team, this standard is determined to be compliant.

115.87	**Data collection**
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	**Data review for corrective action**
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Findings (By Provision): 115.401 (a). The facility is part of the Texas Department of Criminal Justice. All TDCJ facilities were audited in the previous three-year audit cycle. 115.401 (b): The facility is part of the Texas Department of Criminal Justice. The TDCJ has a schedule for all their facilities to be audited within the three-year cycle, with one third being audited in each cycle. The facility is being audited in the audit year 2 of Cycle 5. 115.401 (h) – (m): The auditor had access to and the ability to observe all areas of the facility: was permitted to receive and copy any relevant policies, procedure or documents; was permitted to conduct private interviews and was able to receive confidential information/correspondence from inmates. 115.401 (n): The PREA audit notice was observed to be posted in all of the housing units. Informal conversations were conducted with inmates regarding how long the notice had been posted. The auditor did not receive any correspondence from inmates in the facility.

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings		
115.11 (a)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (c)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	**Contracting with other entities for the confinement of inmates**	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.12 (b)	**Contracting with other entities for the confinement of inmates**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	**Supervision and monitoring**	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional	yes

	practices?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	**Supervision and monitoring**	

	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	**Supervision and monitoring**	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	**Supervision and monitoring**	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	**Youthful inmates**	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	**Youthful inmates**	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	**Youthful inmates**	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	**Limits to cross-gender viewing and searches**	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	**Limits to cross-gender viewing and searches**	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or	yes

	genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an 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, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an 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, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an 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, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an 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, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates	yes

	with disabilities have an 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, including: inmates who have speech disabilities?	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an 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, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency always refrain from relying on inmate	yes

	interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	
115.17 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in	yes

	determining whether to enlist the services of any contractor who may have contact with inmates?	
115.17 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	**Hiring and promotion decisions**	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	**Hiring and promotion decisions**	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	**Hiring and promotion decisions**	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	**Hiring and promotion decisions**	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	**Upgrades to facilities and technologies**	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.18 (b)	**Upgrades to facilities and technologies**	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.21 (a)	**Evidence protocol and forensic medical examinations**	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/	yes

	Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	**Evidence protocol and forensic medical examinations**	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	**Evidence protocol and forensic medical examinations**	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	**Evidence protocol and forensic medical examinations**	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	**Policies to ensure referrals of allegations for investigations**	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	**Policies to ensure referrals of allegations for investigations**	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	**Policies to ensure referrals of allegations for investigations**	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	**Employee training**	
	Does the agency train all employees who may have contact with	yes

	inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates	yes

	received such training?	
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	**Volunteer and contractor training**	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	**Volunteer and contractor training**	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	**Inmate education**	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	**Inmate education**	

	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	**Inmate education**	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	**Inmate education**	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	**Inmate education**	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	**Inmate education**	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	**Specialized training: Investigations**	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	**Specialized training: Investigations**	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	**Specialized training: Investigations**	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	**Specialized training: Medical and mental health care**	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	**Specialized training: Medical and mental health care**	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	**Specialized training: Medical and mental health care**	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	**Specialized training: Medical and mental health care**	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	**Screening for risk of victimization and abusiveness**	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate’s criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	**Screening for risk of victimization and abusiveness**	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	**Screening for risk of victimization and abusiveness**	

	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	**Screening for risk of victimization and abusiveness**	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates?	yes
115.42 (a)	**Use of screening information**	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na

115.42 (d)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	**Protective Custody**	
	Does the facility always refrain from placing 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 is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	**Protective Custody**	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges,	yes

	education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	**Protective Custody**	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	**Protective Custody**	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	**Protective Custody**	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	**Inmate reporting**	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to	yes

	privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	**Inmate reporting**	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	**Inmate reporting**	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	**Inmate reporting**	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	**Exhaustion of administrative remedies**	

	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	**Exhaustion of administrative remedies**	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this	yes

	standard.)	
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	**Exhaustion of administrative remedies**	

	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	**Inmate access to outside confidential support services**	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	**Inmate access to outside confidential support services**	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	**Inmate access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	**Third-party reporting**	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and	yes

	according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	**Staff and agency reporting duties**	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	**Staff and agency reporting duties**	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	**Staff and agency reporting duties**	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	**Staff and agency reporting duties**	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators?	yes
115.62 (a)	**Agency protection duties**	
	When the agency learns that an inmate is subject to a substantial	yes

	risk of imminent sexual abuse, does it take immediate action to protect the inmate?	
115.63 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	**Reporting to other confinement facilities**	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	**Reporting to other confinement facilities**	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	**Staff first responder duties**	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating,	yes

	defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
115.64 (b)	**Staff first responder duties**	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	**Coordinated response**	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	**Preservation of ability to protect inmates from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
115.67 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	**Agency protection against retaliation**	

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	**Agency protection against retaliation**	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	**Agency protection against retaliation**	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	**Post-allegation protective custody**	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	**Criminal and administrative agency investigations**	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	**Criminal and administrative agency investigations**	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	**Criminal and administrative agency investigations**	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	**Criminal and administrative agency investigations**	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	**Criminal and administrative agency investigations**	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	**Criminal and administrative agency investigations**	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual	yes

	abuse investigations. See 115.21(a).)	
115.72 (a)	**Evidentiary standard for administrative investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	**Reporting to inmates**	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	**Reporting to inmates**	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	**Reporting to inmates**	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has	yes

	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	
115.73 (d)	**Reporting to inmates**	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	**Reporting to inmates**	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	**Disciplinary sanctions for staff**	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	**Disciplinary sanctions for staff**	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law	yes

	enforcement agencies(unless the activity was clearly not criminal)?	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	**Corrective action for contractors and volunteers**	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	**Disciplinary sanctions for inmates**	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	**Disciplinary sanctions for inmates**	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	**Disciplinary sanctions for inmates**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	**Disciplinary sanctions for inmates**	
	If the facility offers therapy, counseling, or other interventions	yes

	designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	
115.78 (e)	**Disciplinary sanctions for inmates**	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	**Disciplinary sanctions for inmates**	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	**Disciplinary sanctions for inmates**	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental	na

	health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	
115.81 (d)	**Medical and mental health screenings; history of sexual abuse**	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	**Medical and mental health screenings; history of sexual abuse**	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	**Access to emergency medical and mental health services**	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	**Access to emergency medical and mental health services**	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	**Access to emergency medical and mental health services**	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	**Access to emergency medical and mental health services**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	**Sexual abuse incident reviews**	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	**Sexual abuse incident reviews**	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology	yes

	should be deployed or augmented to supplement supervision by staff?	
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

PREA Agency Audit Report: Final

Name of Agency: Texas Department of Criminal Justice
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 09/26/2025

Auditor Certification	
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.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Matthew Taylor	**Date of Signature:** 09/26/2025

AUDITOR INFORMATION	
Auditor name:	Taylor, Matthew
Email:	matthew@preaauditing.com
Start Date of On-Site Audit:	
End Date of On-Site Audit:	

AGENCY INFORMATION	
Name of agency:	Texas Department of Criminal Justice
Governing authority or parent agency (if applicable):	
Physical Address:	861 Interstate 45, Huntsville, Texas - 77320
Mailing Address:	PO Box 99, Huntsville, Texas - 77340
Telephone number:	8005350283

Agency Chief Executive Officer Information:	
Name:	Bobby Lumpkin
Email Address:	Bobby.Lumpkin@tdcj.texas.gov
Telephone Number:	936-437-2101

Agency-Wide PREA Coordinator Information			
Name:	Cassandra McGilbra	**Email Address:**	cassandra.mcgilbra@tdcj.texas.gov

Agency AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
0	

Number of standards met:
10

Number of standards not met:	
0	

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11 Document Review: · Texas Department of Criminal Justice Board Policy BP—2.09 Prison Rape Elimination Act Ombudsman Policy Statement · Texas Board of Criminal Justice Organizational Chart · Texas Department of Criminal Justice Organizational Structure Interviews: · Interview with agency PREA coordinator / ombudsman Findings by Provision:

115.11 (b)

The Texas Department of Criminal Justice Board Policy BP—2.09 Prison Rape Elimination Act Ombudsman Policy Statement states it is the policy of the Texas Board of Criminal Justice (TBCJ) that the Prison Rape Elimination Act (PREA) ombudsman shall coordinate the Texas Department of Criminal Justice's (TDCJ) efforts to comply with the PREA standards in all of its correctional and community residential facilities. The PREA ombudsman shall have sufficient time and authority to oversee the TDCJ's policies relating to the elimination of sexual abuse and harassment of inmates at correctional facilities, as well as individuals at community residential facilities, and implementation of the PREA standards. In addition, the PREA ombudsman shall oversee the reporting of sexual abuse and sexual harassment to the TDCJ and serve as the independent office to receive and immediately forward reports of sexual abuse and sexual harassment to TDCJ officials, allowing an inmate to remain anonymous upon request. The PREA ombudsman reports directly and only to the TBCJ and reports all pertinent items directly to the TBCJ chairman, as deemed appropriate and necessary. The TDCJ shall establish guidelines for reporting complaints or inquiries from elected officials, the public, and inmates pertaining to allegations of sexual abuse and sexual harassment and related TDCJ initiatives to the PREA ombudsman.

Compliance was also determined through a review of both the Texas Board of Criminal Justice Organizational Chart and Texas Department of Criminal Justice Organizational Structure.

An interview was conducted with the agency PREA coordinator/ombudsman. The PREA coordinator confirmed that she believed she had sufficient time to manage all of her PREA related responsibilities.

The PREA coordinator/ombudsman also reported that in addition to PREA compliance managers that are assigned to each facility throughout the state, she is also responsible for seven regional staff who oversee specific regions. She reported that her office is responsible for site visits, in which they conduct mock audits with the facilities, which is coordinated with the PREA compliance managers.

The PREA coordinator/ombudsman was asked about her actions when she discovers non-compliance with a PREA standard. She reported that they usually initiate a corrective action period for the facility, depending on the specific issue identified. They evaluate whether the non-compliance is attributed to staff actions or policy or procedure violations. Subsequently, they draft a corrective action report, which is forwarded to the director. She emphasized that she and her staff collaborate closely with the staff at the Texas Department of Criminal Justice to rectify non-compliance as expeditiously as possible.

During the audit process, the auditor examined additional criteria to determine whether the PREA coordinator/ombudsman was compliant with the standard, as she does not directly work for The Texas Department of Criminal Justice. The auditor found that there was no additional guidance provided beyond the requirement to

	employ or designate a PREA coordinator. Through interviews with the PREA coordinator/ombudsman, the auditor determined that the coordinator satisfies the requirement of the standard as written. The auditor conducted an examination to ascertain whether the PREA coordinator/ ombudsman possessed the requisite authority and direct access to the agency's most senior leader. This included direct access to the agency's executive or senior leadership team and the requisite influence to establish and implement agency-wide policies, procedures, and practices without interference from other levels of bureaucracy or supervision. The initial interview with the PREA coordinator and subsequent interviews revealed that she satisfies all the aforementioned requirements. Based upon information contained in the PAQ, policies, procedures and interviews conducted, the agency is substantially compliant with this standard.

115.12	**Contracting with other entities for the confinement of inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 Document Review: · The Texas Department of Criminal Justice Solicitation and Modification of Private Residential Reentry Centers Contracts. · The Texas Department of Criminal Justice Solicitation and Modification of Private Transitional Treatment Centers Contracts · The Texas Department of Criminal Justice Solicitation and Modification of Secure Private Facilities Contracts Interviews: · Interview with agency contract administrator Findings by Provision: 115.12 (a) The Texas Department of Criminal Justice Solicitation and Modification Contract specifically outline the following requirements: A. Upon award of this contract, the contractor shall obtain PREA compliance for the facilities within (12) months of the service commencement date. The contractor shall maintain compliance with all applicable PREA standards at all times thereafter.

	B. The contractor shall comply with the PREA Prison/Jail/Community Confinement Standards and report inmate abuse to the TDCJ-PFCMOD. C. The contractor shall notify the TDCJ-PFCMOD when a PREA compliance audit is scheduled. D. The Department designated TDCJ-PFCMOD monitor will monitor the facility to ensure the contractor is compliant with the PREA Prison/Jail/Community Confinement Standards. E. The contractor shall correct all identified areas of non-compliance in regards to PREA Prison/Jail/Community Confinement Standards deemed applicable and within a time frame determined by the Department or by the date of a Department approved extension. F. Upon completion of the PREA compliance audit, the contractor shall provide a copy of the initial report and final report to the TDCJ-PFCMOD. G. All associated fees shall be the contractor’s responsibility. 115.12 (b) The Texas Department of Criminal Justice Solicitation and Modification Contract specifically outline the following requirements: A. Upon award of this contract, the contractor shall obtain PREA compliance for the facilities within (12) months of the service commencement date. The contractor shall maintain compliance with all applicable PREA standards at all times thereafter. B. The contractor shall comply with the PREA Prison/Jail/Community Confinement Standards and report inmate abuse to the TDCJ-PFCMOD. C. The contractor shall notify the TDCJ-PFCMOD when a PREA compliance audit is scheduled. D. The Department designated TDCJ-PFCMOD monitor will monitor the facility to ensure the contractor is compliant with the PREA Prison/Jail/Community Confinement Standards. E. The contractor shall correct all identified areas of non-compliance in regards to PREA Prison/Jail/Community Confinement Standards deemed applicable and within a time frame determined by the Department or by the date of a Department approved extension. F. Upon completion of the PREA compliance audit, the contractor shall provide a copy of the initial report and final report to the TDCJ-PFCMOD. G. All associated fees shall be the contractor’s responsibility.

	During the audit process, the auditor conducted an interview with the agency's designated contract administrator. The contract monitor was inquired about the agency's monitoring mechanisms for newly and renewed contracts involving confinement services to ascertain compliance with the mandated PREA practices. She clarified that the agency employs contract monitors to oversee compliance with the agency's policies, procedures, and specific PREA practices. The contract administrator has reported that compliance reports for each contract entered into within the past 12 months have been completed. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.17 Document Review: · The Texas Department of Criminal Justice Executive Directive PD-75 Applicants with Pending Criminal Charges or Prior Criminal Convictions · The Texas Department of Criminal Justice Employment Application Supplement · The Texas Department of Criminal Justice Safe Prisons / PREA Plan · The Texas Department of Criminal Justice Executive Directive PD-56 Request for and Release of Employment Information or Documents · The Texas Department of Criminal Justice Executive Directive PD-71 Selection System Procedures · The Texas Department of Criminal Justice Executive Directive PD-27 Employment Status Pending Resolution of Criminal Charges or Protective Orders · The Texas Department of Criminal Justice Executive Directive PD-73 Selection Criteria for Correctional Officer Applicants · Examples of Persons Hired or Promoted in the Past 12-Months Interviews: · Interview with human resources staff Findings by Provision:

	115.17 (a) The Texas Department of Criminal Justice Executive Directive PD-75 Applicants with Pending Criminal Charges or Prior Criminal Convictions states the TDCJ will not hire, as an employee or contract employee, any individual who may have contact with offenders, if they have: 1. Engaged in sexual abuse in a prison, jail, adult or juvenile confinement facility, or other similar institution setting; 2. Been convicted of engaging or attempting to engage in sexual activity by use of force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or 3. Been civilly or administratively adjudicated for engaging in the activity listed in Section I.C.1-2. 115.17 (b) The Texas Department of Criminal Justice Executive Directive PD-75 Applicants with Pending Criminal Charges or Prior Criminal Convictions states the TDCJ will consider any incidents of sexual harassment in determining whether to hire an individual, or to enlist the services of a contractor, who may have contact with offenders. During the onsite portion of the audit, the auditor interviewed a representative from human resources. She reported that the agency always considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. 115.17 (c) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states before hiring new employees who may have contact with offenders, the TDCJ shall: a. Perform a criminal background check; and b. Attempt to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse, in accordance with federal, state, and local law. During the onsite portion of the audit, the auditor interviewed a representative from human resources. She reported that the agency performs criminal background checks as required under this provision. 115.17 (d) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states a criminal background record check shall be performed before enlisting the services of any

	contractor who may have contact with offenders. During the onsite portion of the audit, the auditor interviewed a representative from human resources. She reported that the agency performs criminal background checks as required under this provision. 115.17 (e) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states criminal background checks shall either be conducted at least every five years for current employees and contractors who may have contact with offenders, or a system shall be in place to otherwise attain the information for current employees. The Texas Department of Criminal Justice Executive Directive PD-27 Employment Status Pending Resolution of Criminal Charges or Protective Orders states that Employee Relations shall conduct a semi-annual background check for each employee to ensure there are no outstanding warrants of arrest for the employee once during the month of the employee's birthday and once 180 days later. During the onsite portion of the audit, the auditor interviewed a representative from human resources. She reported that the agency is subscribed to T-LETS which is a system that immediately reports to the agency when there is any change to an employee's background. 115.17 (f) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states The TDCJ shall directly ask all applicants and employees who may have contact with offenders about previous misconduct described in Section VIII.A.1.a in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of employee reviews. The TDCJ shall also impose on employees a continuing affirmative duty to disclose knowledge of any such misconduct. 115.17 (g) The Texas Department of Criminal Justice Executive Directive PD-73 Selection Criteria for Correctional Officer Applicants states prior to an applicant being employed by the TDCJ, the applicant shall provide all required documentation. The Employment Section, Human Resources Division, shall verify the authenticity of the documentation. A. An applicant who provides false or inaccurate information or documentation in the application process shall be disqualified from consideration for any TDCJ position for a minimum period of one year from the date of the applicant's PERS 283, State of Texas Application for Employment. B. A current employee who provides false or inaccurate information documentation may be subject to disciplinary action in accordance with PD-22, "General Rules of Conduct and Disciplinary Action Guidelines for Employees."

	115.17 (h) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states unless prohibited by law, information shall be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee after receiving a request from an institutional employer for whom the employee has applied to work. During the onsite portion of the audit, the auditor interviewed a representative from human resources. She stated that the agency does provide information on substantiated allegations of sexual abuse and sexual harassment about former employees upon receiving a request. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.18	**Upgrades to facilities and technologies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18 Document Review: · The Texas Department of Criminal Justice Safe Prisons / PREA Plan · The Texas Department of Criminal Justice Video Surveillance System Preventative Maintenance Checklist · The Texas Department of Criminal Justice Video Surveillance System Guidelines Interviews: · Interview with agency head and agency head designee Findings by Provision: 115.18 (a) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states when designing or acquiring any new unit and in planning any substantial expansion or modification of existing units, the TDCJ shall consider the effect of the design, acquisition, expansion, or modification on the ability to protect offenders from sexual abuse. During the onsite audit, the auditor conducted interviews with both the agency head and the agency head designee. The auditor engaged in a detailed discussion with the agency head regarding their compliance with the specified provision. The agency

	head informed the auditor that they had not designed a facility since the 1990s. However, they recently secured funding for 5,600 additional beds, which will be strategically placed in existing facilities where staffing capacity is anticipated. The design will adhere to the anticipated practices of the ACA. Furthermore, the agency head emphasized the importance of adhering to 100% PREA when making these designs. The agency designee informed me that we conduct thorough assessments of potential areas with a higher incidence of allegations. We are currently in communication with our information technology division to explore the possibility of installing additional cameras. 115.18 (b) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, consideration shall be given as to how the technology may enhance the ability to protect offenders from sexual abuse. During the onsite audit, the auditor conducted interviews with both the agency head and the agency head designee. The agency head designee stated, “We do have a comprehensive video surveillance system on our maximum-security facilities across the state. We have 23 maximum-security facilities that have video surveillance throughout the housing area and the entire facility. Additionally, we implemented body-worn cameras last year to assist in any allegations or assaults that may occur on a facility. These body-worn cameras are also available on our 23 maximum-security facilities throughout the state. There are facilities that do not have body-worn cameras but still have some form of surveillance. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 Document Review: · The Texas Department of Criminal Justice Safe Prisons / PREA Plan · The Texas Department of Criminal Justice Classification Plan · The Texas Department of Criminal Justice Administrative Directive AD-04.17 Inmate Housing Assignment Criteria and Procedures

	Interviews: · Interview with PREA coordinator / ombudsman Findings by Provision: 115.42 (a) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states that when deciding to assign a transgender or intersex offender to a unit for male or female offenders, and when making other housing and programming assignments, consideration shall be made on a case-by-case basis with regard to the health and safety of the offender and potential management or security problems. Housing determinations shall not be made solely on the basis of LGBTI status. Unit Classification Committee (UCC), or a similarly designed committee for units without a UCC, shall use information from the risk screening document required by Section III.B of this plan to make housing, bed, work, education, and program assignments with the goal of separating offenders at high risk of being sexually victimized from offenders at high risk of being sexually abusive in accordance with the TDCJ Classification Plan and the TDCJ Unit Classification Procedures Manual. The committee shall make individualized determinations regarding how to ensure the safety of each offender. During the onsite audit, the auditor conducted an interview with the agency's PREA coordinator and ombudsman. The auditor inquired about the agency's policies regarding the placement of transgender and intersex inmates in dedicated housing units, facilities, or wings. The coordinator confirmed that the agency is not currently under a legal requirement or consent decree that mandates the placement of this population in dedicated spaces. She explained that inmates are housed on a case-by-case basis, and their overall classification scores are considered when determining the most appropriate placement for their health and safety. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.66	**Preservation of ability to protect inmates from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 Document Review:

	· The Texas Department of Criminal Justice Statement of Fact Related to 115.66 Interviews: · Interview with agency head and agency head designee Findings by Provision: 115.66 (a) The Texas Department of Criminal Justice Statement of Fact related to standard 115.66 states the agency has not entered or renewed any collective bargaining or other agreement. TDCJ does not engage in collective bargaining with staff. Staff are subject to the rules of conduct and other TDCJ policies mandating zero tolerance of all forms of sexual abuse and sexual harassment. During the onsite audit, the auditor conducted an interview with the agency head and the agency head designee. The agency head designee reiterated what was written in the statement of fact. The Texas Department of Criminal Justice and the State of Texas is not a collective bargaining State. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 Document Review: · The Texas Department of Criminal Justice Safe Prisons / PREA Plan · The Texas Department of Criminal Justice Administrative Directive AD-02.15 Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents · The Texas Department of Criminal Justice Data Collection Instrument · The Texas Department of Criminal Justice Emergency Action Center Notification Handbook · 2023 Annual Survey of Sexual Victimization Summary Form Findings by Provision: 115.87 (a)

	The Texas Department of Criminal Justice Safe Prisons / PREA Plan states accurate, uniform data shall be collected for every incident of sexual abuse alleged to have occurred at a TDCJ operated facility using a standardized instrument and set of definitions. The Texas Department of Criminal Justice Administrative Directive AD-02.15 Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents, provides the set of definitions required under this provision. 115.87 (b) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states Incident-based sexual abuse data shall be aggregated at least annually. The auditor reviewed examples provided by the agency of aggregated data collected illustrating further compliance with this provision. 115.87 (c) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states the incident-based data collected shall include, at a minimum, information necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The auditor also reviewed the data collection instrument utilized by the agency which is called SPPANS Database. The auditor ensured that the information collected in the instrument minimally captured information necessary to answer all the questions in the Survey of Sexual Victimization. 115.87 (d) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews shall be maintained, reviewed, and collected as needed to complete the SSV. 115.87 (e) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states Aggregated sexual abuse data, from all TDCJ operated facilities, including privately contracted facilities, shall be readily available to the public at least annually, through a website or other means. 115.87 (f) The Texas Department of Criminal Justice reported in the PAQ that the Department of Justice did not request data from the agency from the previous calendar year. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 Document Review: · The Texas Department of Criminal Board Policy BP-02.09 Prison Rape Elimination Act Ombudsman Policy Statement · The Texas Department of Criminal Justice Safe Prisons / PREA Program Annual Report for 2023 · The Texas Department of Criminal Justice Safe Prisons / PREA Plan Interviews: · Interview with agency head and agency head designee · Interview with agency PREA Coordinator / Ombudsman Findings by Provision: 115.88 (a) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states the TDCJ shall review data collected pursuant to Section VII.A of this plan in order to assess and improve the effectiveness of the sexual abuse prevention, detection, and response policies, procedures, and training by: a. Identifying problematic areas; b. Taking corrective action on an ongoing basis; and c. Preparing an annual report of findings and corrective actions for each unit, as well as the TDCJ as a whole, in collaboration with the OIG and PREA ombudsman. The Texas Department of Criminal Justice Board Policy BP-02.09 Prison Rape Elimination Act Ombudsman Policy Statement also states the PREA ombudsman’s responsibilities include the following: 1. Monitor TDCJ policy for the prevention of sexual abuse and sexual harassment of inmates at correctional facilities, as well as individuals at community residential facilities, and compliance with PREA ombudsman policies and procedures to assure PREA compliance. 2. Provide oversight of education and training for employees, inmates, and other individuals assuring the curriculum and trainers cover topics required in the PREA standards to include specific topics and information, and serve as a subject matter

	expert regarding training. 3. Make recommendations to TDCJ executive management concerning changes in policies and procedures necessary to comply with PREA standards. 4. Process complaints and inquiries from elected officials, the public, and inmates concerning sexual abuse and sexual harassment and TDCJ initiatives related to PREA and ensure impartial resolution. The PREA ombudsman may use discretion to respond directly or forward complaints to appropriate TDCJ staff for investigation and disposition. Criminal investigations are the responsibility of the Office of the Inspector General (OIG). 5. Oversee the administrative investigation of allegations of sexual abuse and sexual harassment to assure quality and thorough investigations. 6. Collect statistics regarding allegations of sexual abuse and sexual harassment from each correctional facility to comply with PREA standards. 7. Prepare monthly and semiannual activity reports for distribution to the TBCJ chairman, TBCJ members, and TDCJ executive management. 8. Ensure the TBCJ chairman and TDCJ executive management are informed of any problematic, systemic trends. During the onsite audit, the auditor conducted interviews with the agency head and the agency head designee. The auditor inquired about the agency's use of incident-based sexual abuse data to assess and enhance sexual abuse prevention detection and response policies and practices. The agency head designee informed the auditor that the Texas Department of Criminal Justice (TDCJ) collaborates closely with the PREA ombudsman to collect all pertinent data associated with reports of sexual abuse and sexual harassment. The designee further stated that all TDCJ facilities collect incident-based data and aggregate it for the PREA ombudsman's office to develop corrective action response plans tailored to the assessed needs. During the onsite audit, the auditor conducted an interview with the agency's PREA coordinator and ombudsman. The auditor inquired about the agency's data collection and aggregation practices for assessing and improving the effectiveness of its sexual abuse prevention, detection, and response policies. The coordinator reported that the agency diligently collects sexual abuse and sexual harassment data from all its facilities, which is securely retained in a specific agency database accessible only to authorized staff. This data is aggregated, and patterns and problem areas are identified through this process. The coordinator also mentioned that PREA audit reports are reviewed to identify any deficiencies. All this information is utilized to determine if there is a need to modify or update policies and procedures to enhance sexual safety in the facilities. Additionally, the coordinator indicated that her office is responsible for the PREA portion of the annual report, which is highly comprehensive. 115.88 (b)

	The Texas Department of Criminal Justice Safe Prisons / PREA Plan states the annual report shall include a comparison of the data and corrective actions from the current year with those from prior years and shall provide an assessment of the progress made in addressing sexual abuse. The auditor also reviewed the provided Texas Department of Criminal Justice Safe Prisons / PREA Program Annual Report for 2023. The report provided includes a comparison of the current year's data and corrective actions with those from prior years. Additionally, the annual report provides an assessment of the agency's progress in addressing sexual abuse. 115.88 (c) The Texas Department of Criminal Justice provided a web link in the PAQ where a copy of the most recent annual report was publicly available for review. The annual report was also reviewed and approved by the agency head. During the onsite audit, the auditor inquired with the agency head designee whether the annual report had been approved by the agency head. The designee responded affirmatively. 115.88 (d) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states personal identifiers and sensitive information shall be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a unit, while maintaining the nature of the material. The auditor reviewed the Texas Department of Criminal Justice Safe Prisons / PREA Program Annual Report for 2023, which illustrated compliance with this requirement. During the in-person audit, the auditor conducted an interview with the agency's PREA coordinator and ombudsman. The coordinator was inquired about the typical information that is redacted from the annual report. She informed the auditor that there is no requirement to redact information from the annual report because it does not contain any personally identifiable information. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.89	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89

	Document Review: · The Texas Department of Criminal Justice Executive Directive ED-02.29 Records Management · The Texas Department of Criminal Justice Safe Prisons / PREA Plan · The Texas Department of Criminal Justice Records Retention Schedule Interviews: · Interview with agency PREA Coordinator / Ombudsman Findings by Provision: 115.89 (a) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states All data collected pursuant to Section VII.A shall be securely maintained. The Texas Department of Criminal Justice Executive Directive ED-02.29 Records Management states the TDCJ develops, implements, and monitors an agency-wide records management program that complies with all state and federal laws while safeguarding all state records, both paper and electronic, through effective records management, retention, storage, protection, and disposition. The TDCJ continually addresses the use of new technologies for records management while ensuring transparency by open and verifiable documentation of the processes and activities carried out in the management of all state records. During the onsite audit, the auditor conducted an interview with the agency's PREA coordinator and ombudsman. The auditor inquired about the agency's data collection and aggregation practices for assessing and improving the effectiveness of its sexual abuse prevention, detection, and response policies. The coordinator reported that the agency diligently collects sexual abuse and sexual harassment data from all its facilities, which is securely retained in a specific agency database accessible only to authorized staff. This data is aggregated, and patterns and problem areas are identified through this process. The coordinator also mentioned that PREA audit reports are reviewed to identify any deficiencies. All this information is utilized to determine if there is a need to modify or update policies and procedures to enhance sexual safety in the facilities. Additionally, the coordinator indicated that her office is responsible for the PREA portion of the annual report, which is highly comprehensive. 115.89 (b) The Texas Department of Criminal Justice Safe Prisons / PREA Plan states aggregated sexual abuse data, from all TDCJ operated facilities, including privately contracted facilities, shall be readily available to the public at least annually, through a website or other means. The auditor reviewed the agency's external website and verified that the most recent

	edition of the agency’s annual report was posted and readily available to the public. 115.89 (c) (d) The Texas Department of Criminal Justice Records Retention Schedule illustrates that the agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. The Texas Department of Criminal Justice reported in the PAQ that they do not put personally identifiable information in the annual report, therefore there is nothing to redact. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination:
	Auditor Discussion
	115.401 Document Review: · The Texas Department of Criminal Justice Agency External Website Findings by Provision: 115.401 (a) The Texas Department of Criminal Justice ensured that during the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency mandated that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once. The auditor reviewed agency records which illustrated the agency met this standard requirement during the prior three-year audit cycle. 115.401 (b) The Texas Department of Criminal Justice ensured that during each one-year period starting on August 20, 2013, the agency shall completed audits of at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency. The auditor reviewed agency records which illustrated the agency met this standard requirement during the prior year.

	Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 Document Review: · The Texas Department of Criminal Justice Agency External Website Findings by Provision: 115.403 (a) The Texas Department of Criminal Justice ensures that auditor’s final reports are published to the agency’s external website and therefore readily available for public review. The auditor verified the public availability of all final audit reports through a review of the agency’s external website. Each report was accompanied by a web link, serving as evidence of their official release. Based upon information contained in the PAQ, policies, procedures, site review and interviews conducted, the agency is substantially compliant with this standard

Appendix: Provision Findings		
115.11 (b)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.12 (a)	**Contracting with other entities for the confinement of inmates**	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	**Contracting with other entities for the confinement of inmates**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.17 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

	described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	**Hiring and promotion decisions**	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	**Hiring and promotion decisions**	

	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	**Hiring and promotion decisions**	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	**Hiring and promotion decisions**	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	**Upgrades to facilities and technologies**	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	**Upgrades to facilities and technologies**	
	If the agency installed or updated a video monitoring system,	yes

	electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.42 (c)	**Use of screening information**	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.66 (a)	**Preservation of ability to protect inmates from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.87 (a)	**Data collection**	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	**Data collection**	

	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	**Data review for corrective action**	
	Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?	yes

115.88 (c)	**Data review for corrective action**	
	Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	**Data review for corrective action**	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	**Frequency and scope of audits**	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes

	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.403 (f)	**Audit contents and findings**	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes