

PREA Facility Audit Report: Final

Name of Facility: Melton Center

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/18/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
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.	<input type="checkbox"/>
Auditor Full Name as Signed: Darla P. O'Connor	Date of Signature: 10/18/ 2023

AUDITOR INFORMATION	
Auditor name:	O'Connor, Darla
Email:	darla@preaauditing.com
Start Date of On-Site Audit:	08/25/2023
End Date of On-Site Audit:	08/25/2023

FACILITY INFORMATION	
Facility name:	Melton Center
Facility physical address:	1765/1785 Washington Blvd, Beaumont, Texas - 77706
Facility mailing address:	4655 Collier St., Beaumont, Texas - 77705

Primary Contact	
Name:	Jessica Bean
Email Address:	jbean@landmanor.org
Telephone Number:	409-838-3946

Facility Director	
Name:	Jean Martinez
Email Address:	jmartinez@landmanor.org
Telephone Number:	409-835-2662

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	65
Current population of facility:	33
Average daily population for the past 12 months:	50
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	18+
Facility security levels/resident custody levels:	Low
Number of staff currently employed at the	15

facility who may have contact with residents:	
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Land Manor, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	4655 Collier Street, Beaumont, Texas - 77706
Mailing Address:	
Telephone number:	4098383946

Agency Chief Executive Officer Information:	
Name:	Arlene Greene
Email Address:	agreene@landmanor.org
Telephone Number:	4098383946

Agency-Wide PREA Coordinator Information			
Name:	Jessica Bean	Email Address:	jbean@landmanor.org

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

- 115.231 - Employee training
- 115.233 - Resident education
- 115.265 - Coordinated response

Number of standards met:

38

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-08-25
2. End date of the onsite portion of the audit:	2023-08-25

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?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International Texas Coalition Against Domestic Violence Rape, Abuse and Incest National Network The Rape and Incest Crisis Center of Southeastern Texas

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	65
15. Average daily population for the past 12 months:	50
16. Number of inmate/resident/detainee housing units:	1
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> 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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	38
38. 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
39. 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:	1
40. 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:	1
41. 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:	1
42. 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:	0
43. 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:	1

<p>44. 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:</p>	<p>0</p>
<p>45. 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:</p>	<p>0</p>
<p>46. 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:</p>	<p>1</p>
<p>47. 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:</p>	<p>0</p>
<p>48. 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):</p>	<p>There were no problematic areas regarding identifying the population characteristics of residents who were in the facility the first day of the audit. The auditor requested and the facility provided a breakdown of random inmates and targeted residents, as well as a complete alphabetical resident roster.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. 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:</p>	<p>15</p>
<p>50. 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:</p>	<p>0</p>

<p>51. 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:</p>	<p>0</p>
<p>52. 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:</p>	<p>The facility reports 0 volunteers approved to enter the facility and have contact with residents.</p> <p>The facility reports 0 contractors approved to enter the facility and have contact with residents.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>5</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>The facility count the first day of the on-site audit was 38. According to the Auditor Handbook this requires a minimum of 5 random residents to be interviewed. The Auditor used the alphabetical housing unit rosters of residents to randomly select residents from various age groups, ethnicities, and races. The Auditor randomly chose residents from varying housing units to interview, ensuring diversity in age and race.</p>
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

57. 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):

The institutional count the first day of the onsite audit was 38. According to the Auditor Handbook with a population of 38, the auditor shall interview a minimum of 5 random residents and 5 targeted residents. Five random residents were interviewed. These were residents that were not part of the targeted resident interviews. The Auditor used the alphabetical housing unit rosters of residents to randomly select residents from various age groups, ethnicities, and races. The Auditor randomly chose residents to interview, ensuring diversity in age, race, and length of sentence.

During the on-site tour, the Auditor had several conversational encounters with residents regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process. As a result of the audit notice posting the Auditor received did not receive any letters from a resident.

At the beginning of each interview the Auditor made clear to the resident why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the resident's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the resident wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random residents willingly participated in the interview process. All responses were hand typed. During the random interviews, no PREA issues were revealed, no other interview protocols were utilized. All random residents responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	6
<p>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".</p>	
60. 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:	<input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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).	Facility staff reported there were none assigned to the facility. During the facility tour none were observed by the Auditor.

61. 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:	1
62. 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:	1
63. 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:	1
64. 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:	1
65. 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:	1
66. 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:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> 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.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>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).</p>	<p>Facility staff reported there were none assigned to the facility. During the facility tour none were observed by the Auditor.</p>
<p>67. 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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> 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.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>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).</p>	<p>Facility staff reported there were none assigned to the facility. During the facility tour none were observed by the Auditor.</p>
<p>68. 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:</p>	<p>1</p>

<p>69. 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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> 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.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>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).</p>	<p>Facility staff reported there were none assigned to the facility. During the facility tour none were observed by the Auditor.</p>

<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor requested and received a roster of residents who fell into the targeted categories. The Auditor chose residents from the list of targeted residents provided by the facility staff. Once selected, each resident was put on “call- out” with a time to report to the private space designated for interviews.</p> <p>Breakdown of Targeted Resident Interviews</p> <ul style="list-style-type: none"> Transgender or Intersex - 0 Gay or Bisexual - 1 Physically Disabled - 0 Cognitively Disabled - 1 Hearing Impaired - 1 Visually Impaired - 1 LEP - 1 Reported Abuse - 0 Disclosed Abuse in Screening - 1 <p>Residents in Segregated Housing for PREA - 0</p> <p>Youthful Residents - 0</p> <p>The information the Auditor gained from the facility tour, informal conversations with residents and staff, as well as formal interviews with staff and residents supported this assertion. At the beginning of each interview the Auditor made clear to the resident why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the resident’s participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked the resident if he wanted to participate and if so, could she ask him a few questions. The Auditor would then ask the random protocol questions followed by the specific targeted protocol questions. All responses were typed directly onto the protocol form. Regarding personal safety, all residents interviewed reported they felt safe from sexual harassment and sexual abuse.</p>
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>5</p>
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<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

The random staff interviews were conducted with staff who were available on the dates of the on-site audit. They were staff who were not part of the specialized staff interviews. During the on-site tour, the Auditor had several conversational encounters with staff regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process. A total of five formal random staff interviews were conducted.

As a result of the audit notice posting the Auditor did not receive any letters from the facility staff.

At the beginning of each interview the Auditor made clear to the staff why she was at the facility, what her role was in the PREA process and explained why interviews were needed.

The Auditor also discussed the staff's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked the staff if they wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions. All random staff willing participated in the interview process. All responses were typed directly onto the protocol form.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random staff responded they were aware of the zero-tolerance policy, they knew how to report an incident, they knew how to receive a report, they knew everyone had a right to be free from retaliation, and they felt the staff took PREA issues very seriously.

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.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	10
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. 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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	<p>Using the list of specialized staff provided, the Auditor was able to select individuals for interviews. All specialized staff provided answers based on the line of questioning on the specific interview protocols for their position and responsibilities. There were ten individuals interviewed using fourteen protocols.</p> <p>During interviews with specialized staff, the Auditor learned PREA. investigations can be initiated in several ways: “confidential” letters.</p> <p>can be mailed out of the facility, calls to the PREA Ombudsman, written notes given to trusted staff, verbal reports, or through third party reporting.</p> <p>Additionally, any resident or staff member may write a note, letter or any other type of correspondence and place it in any locked. correspondence box located throughout the facility. When PREA correspondence is found inside the grievance box, the mailbox, the box for legal mail, etc. it is immediately directed to the Program Director, or the Agency PREA Coordinator and it is documented and addressed according to PREA Standards.</p>

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.

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. 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

86. 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

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

Land Manor is a non-profit organization licensed by the Texas Department of Health and Human Services to provide treatment services for individuals and families struggling with substance abuse. They have been providing Substance Use Treatment and Recovery since 1969. Land Manor has a contract to house TDCJ residents in two facilities, Franklin House and Melton Center. The Franklin House is located at 1635 Avenue A, Beaumont, TX 77701. It is a 50-bed facility that offers a residential program for TDCJ adult males. At the time of the on-site audit Franklin House was under construction, undergoing full renovations. As a result, Franklin House was not housing TDCJ residents at the time of the on-site audit. The Land Manor-Melton Center is located at 1785 Washington Blvd in Beaumont, Texas 77701. The Melton Center is a 65-bed facility offers a residential program for TDCJ adult females. The facility population was 38 on the first day of the audit. The program is designed to enhance the physical, spiritual, social, and emotional needs of the chemically dependent individual. Land Manor, Inc. is a non-profit organization licensed by the Texas Department of State Health Services to provide you with the tools you need to achieve recovery from alcohol and drug addiction.

The sleeping areas are rooms with multiple beds. Each sleeping area has a bathroom either in the room or immediately outside the room. Each bathroom had a shower, toilet and sink. All showers are single stalls and provide ample privacy with a shower curtain, Bathrooms provide privacy by providing single occupancy showers and stalls and doors in the bathroom. Additional areas toured in the facility were the kitchen, resident dining room, day rooms, administrative offices, recreational area, computer lab, library, programming area, storage closets, and laundry.

During the tour of the facility, the Auditor interacted informally and conversationally

with staff and residents, inspected bathrooms, showers and toilets to identify potential cross-gender viewing concerns, checked for blind spots, observed staff-to-resident ratios, etc. In all resident areas, the Auditor assessed the level of staff supervision, by asking questions about who was assigned to a specific post or staff position, reviewing staffing rosters, and asking informal questions to determine whether residents were in positions of supervision over other residents. The facility did not have any opposite gender staff working at the time of the on-site audit. Throughout the on-site review, the Auditor discussed what was being observed and reviewed, there were no discrepancies identified. When the Auditor sought clarification, appropriate responses were always provided, and/or staff demonstrated proper procedures.

During the tour, the auditor observed numerous postings of the Notice of PREA Audit as well as PREA Posters posted neatly behind plexiglass on bulletin boards. Following the tour, the auditor began the interview process, interviewing staff and residents. After the on-site audit, the auditor conducted an exit briefing with the Program Director.

During the audit period, the following individuals participated in the interview process as specialized staff members. Due to logistics, some of these interviews were conducted telephonically or through written statements. Each of their remarks are documented and presented in this report. All in-person interviews occurred in a private space. Each of these individuals were interviewed using the applicable interview protocols.

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.

90. 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

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Personnel and Training Files:

The PAQ reflects 15 facility staff. There was a total of fifteen record reviews conducted among staff. The staff is so small, every record was reviewed. All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable.

Resident Records:

On the first day of the audit there were 38 residents. There were 38 resident records reviewed. All records had a signed acknowledgment sheet, had received PREA information and viewed the PREA video. All residents had received PREA information during intake, had their PREA screening within 72 hours of admission, and had comprehensive PREA education within 30-days of intake. Finally, all residents who had been in the program over 30 days had been reassessed within thirty days of their initial 72-hour assessment.

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, the facility reported zero allegations of sexual abuse and zero sexual harassment allegations in the past twelve months. As a result, there were zero investigative files to review.

Investigation Files:

At the time of the audit, information received regarding the allegations of sexual abuse during the past twelve months revealed a total of zero allegations reported.

At the time of the audit, information received regarding the allegations of sexual harassment during the past twelve months revealed a total of zero sexual harassment allegations reported.

The facility staff I encountered were warm and professional. Their general attitudes displayed a culture that is committed to sexual safety

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.

92. 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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

93. 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.

94. 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

95. 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	0	0	0
Total	0	0	0	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.

96. 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

97. 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

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	There were zero sexual abuse allegations reported in the past 12 months.

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>There were zero sexual harassment allegations reported in the past 12 months.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>There were zero sexual abuse allegations in the past 12 months. There were zero sexual harassment allegations in the past 12 months. Consequently, there were zero investigative files to review.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. 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

116. 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

121. 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

Identify the name of the third-party auditing entity

PREA Auditors of America

Standards
<p>Auditor Overall Determination Definitions</p> <ul style="list-style-type: none"> • 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)
<p>Auditor Discussion Instructions</p> <p>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.</p>

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • 448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020 • LM.MC Organizational Chart, updated 06-15-2023 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator <p>During the interview process, the PREA Coordinator indicated there was sufficient</p>

time to complete the required PREA responsibilities. It is evident the PREA Coordinator is knowledgeable of the expectations and responsibilities of the position. The PREA Coordinator indicated there was sufficient time to attend to all PREA related responsibilities.

Provision (a)

The Pre-Audit Questionnaire (PAQ) indicates the facility has zero-tolerance as it relates to all forms of sexual abuse or sexual harassment in the facility. The PAQ states the policy outlines how the facility will implement prevention, detection and response to sexual abuse and sexual harassment. It further asserts the policy includes clear definitions of prohibited behaviors and approved sanctions for participation in those behaviors.

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, indicates Land Manor, Inc. and Melton Center has zero-tolerance towards all forms of sexual abuse and sexual harassment in the facilities. Land Manor, Inc. will not tolerate verbal or physical conduct by anyone which harasses, disrupts or that creates an intimidating, offensive or hostile environment. While all forms of harassment are prohibited it is the Agency's policy to emphasize that sexual harassment is specifically prohibited. It is the responsibility of each Supervisor and Program Director to maintain an environment free of any form of sexual harassment. Further it indicates the Supervisor or Program Director shall ensure all staff are knowledgeable of the agency zero-tolerance policy regarding sexual abuse, voyeurism, and sexual harassment, as well as methods of prevention, detection, reporting, and response to allegations of sexual abuse, voyeurism, sexual harassment, extortion, and other acts of offender aggression.

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, pp 1-2, addresses the definitions of prohibited behaviors regarding sexual abuse and sexual harassment.

DEFINITIONS: (PER PREA COMMUNITY CONFINEMENT STANDARDS)

Definitions related to sexual abuse. For purposes of this part, the term Sexual abuse includes:

1. Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and
2. Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer. Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;

2. Contact between the mouth and the penis, vulva, or anus;

3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and

4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation. Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;

2. Contact between the mouth and the penis, vulva, or anus;

3. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

4. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

6. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;

7. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and

8. Voyeurism by a staff member, contractor, or volunteer.

9. Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

Sexual harassment includes— (1) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed toward

another; and (2) Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.”

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, pp 6-7 includes sanctions for those found to have participated in prohibited behaviors.

Provision (b)

The positions and hierarchy within Land Manor and Melton Center for PREA personnel was confirmed through a review of the LM.MC organization chart The LM.MC Organizational Chart, updated 06-15-2023, lists the Associate Executive Director has the Agency-wide PREA Coordinator.

The PREA Coordinator (PC) is classified at the Executive Level and is a full-time position dedicated solely to PREA compliance. The PC has sufficient time to manage all PREA related responsibilities. The PC reports directly to the Executive Director of the agency.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets the standard which addresses zero tolerance of sexual abuse and sexual harassment: PREA coordinator.

115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none">• Pre-Audit Questionnaire (PAQ) and supporting documentation provided.• 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none">• Agency PREA Coordinator (APC) <p>Through the interview process the APC indicated the agency/facility do not contract with entities for the confinement of residents.</p>

	<p>Provision (a)</p> <p>Pre-Audit Questionnaire (PAQ) revealed Land Manor, Inc and Melton Center do not contract with other entities for the confinement of residents.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. Number 1, Contracting with other entities for the confinement of residents (corresponding to 115.212 PREA) indicates Land Manor, Inc. and Melton Center do not contract with other entities for the confinement of residents.</p> <p>Provision (b)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. Number 1, Contracting with other entities for the confinement of residents (corresponding to 115.212 PREA) indicates Land Manor, Inc. and Melton Center do not contract with other entities for the confinement of residents.</p> <p>Provision (c)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. Number 1, Contracting with other entities for the confinement of residents (corresponding to 115.212 PREA) indicates Land Manor, Inc. and Melton Center do not contract with other entities for the confinement of residents.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses contracting with other entities for the confinement of residents.</p>
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115.213	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Master Staffing Plan revised 08/01/2019. • Master Staffing Plan 2023, dated September 1, 2021

Interviews with the following:

- Agency PREA Coordinator (APC)
- Facility Head - Program Director (PD)

Through the interview process the APC and the PD indicated random reviews of the staffing levels and how they affect the resident programming are consistently conducted. Reviews of other concerns, such as the physical plant configuration, internal or external oversight bodies, resident population configuration, and placement of supervisory staff, line-staff needs and any prevalence of substantiated or unsubstantiated incidents of sexual abuse are also consistently conducted.

Provision (a)

The PAQ indicated the facility has a staffing plan, and it takes into consideration the physical layout of the facility; the composition of the resident population; the prevalence of the substantiated and unsubstantiated incidents of sexual abuse and any other relevant factors.

The Auditor reviewed copies of the most recent annual PREA staffing report. The report was comprehensive and addressed each of the bullet items required according to Provision (a). On an annual basis, quality assurance audits are conducted to ensure compliance with the established staffing model. The staffing plan is predicated upon a daily facility resident population of 65.

The PAQ confirms the average daily number of residents during the past 12 months was 50.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Number 2, a, Supervision and Monitoring (corresponding to 115.213 PREA) indicates the following with regard to the staffing plan:

The Texas Department of State Health Services standards regarding client-to-staff ratio and client supervision/monitoring will be followed. A review of facility staffing patterns will be conducted annually by the PREA Coordinator (Quality Management Coordinator). Staffing plans shall provide for adequate levels of staffing, and where applicable, video monitoring, to protect clients against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, Land Manor, Inc. shall take into consideration:

- 1) the physical layout of the facility
- 2) The composition of the client population
- 3) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- 4) Any other relevant factors

	<p>Provision (b)</p> <p>The PAQ indicates the facility did not have any staffing deviations in the past 12 months. The APC confirmed the facility did not have any staffing deviations in the past 12 months.</p> <p>In the event a mandatory post is vacant, the post is filled with overtime staff.</p> <p>Provision (c)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. Number 2, b, Supervision and Monitoring (corresponding to 115.213 PREA) indicates the following with regard to the staffing plan:</p> <p>In circumstances where the staffing plan is not complied with, Land Manor, Inc. shall document and justify all deviations from the plan. Whenever necessary, but no less frequently than annually, Land Manor, Inc. shall assess, determine, and document whether adjustments are needed to:</p> <ol style="list-style-type: none"> 1) The staffing plan 2) Prevailing staffing patterns 3) The deployment of the video monitoring systems and other monitoring technologies 4) The resources available to commit to ensure adequate staffing levels. <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meet the standard regarding supervision and monitoring, ensuring that the safety of staff and residents is a priority.</p>
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115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Training records for facility staff 2022/2023

Observations during facility tour

During the facility tour the Auditor observed that zero male staff were working at the facility.

Interviews with the following:

- Random Staff
- Random Residents

During formal interviews and informal conversations with staff, each staff member confirmed they had never been part of a cross gender search. Further staff indicated no male staff were assigned to the facility.

During formal interviews and information conversations with staff, each staff member specifically stated that no searches would ever be permitted for the sole purpose of identifying a resident's genital status.

During the interview process staff indicated transgender or intersex residents would be able to shower privately. When asked how this would be arranged, each staff member reported alternative showering times would be implemented as needed. Each staff member further stated the transgender or intersex residents would have the opportunity for input into the decision-making process of alternative shower times and the resident's input would carry great weight in the decision-making process.

During the interview process the residents interviewed reported there are zero male staff assigned to the facility.

During formal interviews and informal conversations with residents, each confirmed they had never been part of a cross gender search.

During formal interviews and informal conversations with residents, each residents confirmed they had never been part of a cross-gender search.

There were zero transgender residents at the time of the on-site audit.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. number 3, a, indicates the facility shall not conduct cross-gender searches or pat-downs of any type under any circumstances. Facility staff are required to loudly announce their entrance into a dorm housing resident of the opposite gender. Likewise, staff are prohibited from entering the restroom area in opposite gender dorms without loudly announcing their presence and gaining verbal assurance that the occupants are fully clothed.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 1-2. Section 3 (a) - (c) indicates

a. the facility shall not conduct cross-gender searches or pat-downs of any type under any circumstances. Facility staff are required to loudly announce their entrance into a dorm housing resident of the opposite gender. Likewise, staff are prohibited from entering the restroom area in opposite gender dorms without loudly announcing their presence and gaining verbal assurance that the occupants are fully clothed.

b. Clients shall be allowed to shower, perform bodily functions, and change clothing without staff viewing their breasts, buttocks, or genitalia excluding exigent circumstances. If staff have observed said body parts, excluding exigent circumstances, the staff member is responsible for making an immediate report and submitting a written statement describing the circumstances that resulted in the incident. This report must be submitted to the Program Director prior to the end of the employee's work shift.

c. Staff shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the client's genital status.

The PAQ reflects the facility does not conduct cross-gender strip or cross gender visual body cavity searches of residents. Consequently, it reports zero cross gender strip or cross gender visual body cavity searches in the past twelve months.

Provision (c)

The PAQ indicates the facility reports the facility requires all exigent circumstances of cross-gender strip searches and cross-gender visual body cavity searches be documented. As stated in Provision (a), the facility report there have been zero cross-gender strip searches or cross gender visual body cavity searches conducted in the past twelve months.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 1-2. Section 3 (b) indicates clients shall be allowed to shower, perform bodily functions, and change clothing without staff viewing their breasts, buttocks, or genitalia excluding exigent circumstances. If staff have observed said body parts, excluding exigent circumstances, the staff member is responsible for making an immediate report and submitting a written statement describing the circumstances that resulted in the incident. This report must be submitted.

On the PAQ, the facility indicated they allowed residents to shower, perform bodily functions and change clothes without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine cell checks.

	<p>Provision (e)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 1-2. Section 3 (c) indicates staff shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the client’s genital status.</p> <p>Provision (f)</p> <p>The Auditor reviewed copies of the 2022/2023 PREA training sessions for facility staff. The Auditor verified each signature on the sign-in sheet correlated to an existing staff member listed on the staff roster, ensuring all staff received the required training. All participants also signed an acknowledgment of training materials. Training topics included appropriate search techniques, specifically cross-gender pat searches and searches of transgender and intersex residents.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding the limits to cross-gender viewing and searches.</p>
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115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • List of Approved Interpreters • Annual PREA Training Fiscal Year 2022/2023 • Staff attendance record for Fiscal year 2022/2023 PREA Training <p>Observations of PREA poster locations during on-site tour of facility</p> <p>During the tour, the Auditor observed PREA posters were prominently displayed in each housing unit, work area, hallways, as well as numerous other areas throughout the facility in both English and Spanish.</p>

Interviews with the following:

- Facility Head - Program Director
- Residents in the Targeted Group

Six LEP residents were interviewed. The residents stated that materials were made available in their language and that staff interpreters were readily available to assist them when needed.

The Auditor interviewed five targeted residents. One was visually impaired; one was hearing impaired; one was cognitively disabled; one was gay/bisexual; one disclosed prior victimization during risk screening. The visually impaired resident was able to see through corrective lenses. assigned a permanent resident assistant. The hearing-impaired resident stated she was able to function with the assistance of staff. The gay and bisexual resident stated she did not feel like she was singled out and was being treated fairly. The resident with cognitive disabilities indicated she had a clear understanding of the PREA guidelines and was able to explain her rights and articulate multiple methods by which she could report an issue if necessary. The resident who disclosed victimization during screening was offered a mental health referral.

Through the interview process, the Program Director shared the facility has established procedures to provide residents with disabilities or residents who are Limited English Proficient (LEP), the opportunity to participate in PREA reporting process through several avenues such as staff interpreters and outside service providers as needed.

Provision (a)

According to the PAQ, the facility has procedures to provide disabled residents and limited English proficient residents with equal opportunity to participate in and benefit from all aspects of the agency's effort to prevent, detect and respond to sexual abuse and sexual harassment.

The Auditor reviewed written documents, training materials, as well as PREA brochures, which are provided in both English and Spanish to the resident population.

In the event an approved interpreter is not available the staff can use Google Translate. Google translate can be accessed via a computer with an attached microphone to address any translation needs for the residents of the facility. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week.

Provision (b)

PREA Policy p. 2, Section 4, a-c, Clients with disabilities and clients with limited English proficiency. (corresponding to 115.216 PREA)

(a) Land Manor, Inc. will seek available resources (verbal and written) for clients with disabilities (deaf/hearing impaired, blind, intellectual, psychiatric, or speech disabilities, etc.) or clients who do not speak/read English. Resources will include interpreter services, written materials (Braille, Spanish version, etc.), and/or other local resources (such as Department of Assistive and Rehabilitative Services).

(b) Land Manor, Inc. shall take reasonable steps to ensure meaningful access to all aspects of efforts to prevent, detect, and respond to sexual abuse and sexual harassment to clients who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

(c) Land Manor, Inc. shall not rely on client interpreters/readers/assistants except where a delay in obtaining an interpreter could compromise the client's safety, performance of first-response duties, or the investigation of the client's allegations.

The Auditor reviewed documentation that all facility staff had received PREA training, during the calendar year 2022/2023. This training was extensive and comprehensive, instructing staff of the various components of Americans with Disabilities Act, including the appropriate treatment of those residents who are covered under the act. Staff receive PREA training annually, staff meetings, and shift exchanges.

Provision (c)

According to the PAQ, in the past 12 months, there were zero instances where resident interpreters, readers, or other types of resident assistants have been used.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 2, Section 4, c, clients with disabilities and clients with limited English proficiency. (corresponding to 115.216 PREA) indicates Land Manor, Inc. shall not rely on client interpreters/readers/assistants except where a delay in obtaining an interpreter could compromise the client's safety, performance of first-response duties, or the investigation of the client's allegations.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding residents with disabilities and residents who are limited English proficient.

115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Land Manor Applicant Interview Form
- Personnel record reviews

Interviews with the following:

- Human Resource Manager (HRM)

Through the interview process the Human Resource Manager (HRM) indicated that the potential hire is required to fill out the personnel documents, which require the disclosure of the standard required items. The HRM stated the agency/facility takes a continually active stance with the requirements of the PREA standards and have developed a very comprehensive system of tracking to ensure that all the required history checks are completed for pre-hires, promotions, and five-year reviews.

Through the interview process, the HRM indicated the agency/facility requires background checks on all new hires, promotions, and existing staff every five years.

Through the interview process the HRM reported that a condition of staff employment is that any arrest activity must be reported through the respective employees reporting structure. Additionally, any information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be provided upon request.

Provision (a)

The PAQ reflects 15 staff and 29 new hires in the past twelve months. The facility also reported zero contractors and zero volunteers.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp 2-3, Number 5, a-j, 5. Hiring/promotion decisions. (corresponding to 115.217 PREA)

(a) All Land Manor, Inc. employees who have direct contact with clients are approved for hire through a NCIC/TCIC criminal background records check, including previous employers, conducted by the Texas Department of Criminal Justice.

(b) Land Manor, Inc. shall inquire of all applicants through documented interview forms about previous personal relationships with clients, and./or history of sexual misconduct, including any incidents of sexual harassment.

(c) Any allegation of sexual abuse and sexual harassment by a staff member will be reported to the TDCJ Contract Monitor within 1 hour and the Emergency Action

Center (EAC) at the direction of the Contract Monitor. The allegation will also be reported to the Texas Department of State Health Services (TDSHS) within 24 hours.

(d) Land Manor, Inc. shall perform a PREA pre-employment questionnaire. The facility shall not hire or any individuals who:

- 1) Disclose, or we discovered, substantiated allegations of sexual abuse or sexual harassment.
- 2) 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);
- 3) 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;
- 4) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (A)(2) of this section. Further, the agency will consider any and all incidents of sexual harassment prior to hiring any employee or contracting with any contractor.

(e) Land Manor, Inc. shall 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. Land Manor, Inc. shall not promote anyone or enlist services of any contractor who may have contact with clients who meet the requirements of (d)(2-4 above).

(f) All employees are required to disclose any such misconduct immediately. Omission regarding such misconduct or the provision of materially false information related to PREA shall be grounds for termination.

(g) Land Manor, Inc., imposes upon all employees and contractors a continuing affirmative duty to disclose any sexual abuse, sexual harassment or any allegation of misconduct related to paragraph (d) of this policy to their immediate supervisor within 24-hours of the allegation.

(h) Land Manor, Inc. shall perform a criminal background record checks before enlisting the services of any contractor, in the event one is ever used, who may have contact with the client.

(i) Land Manor, Inc. makes an effort 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.

(j) Land Manor, Inc. does not perform record checks every five years. During the initial criminal history check, each employee's information is entered into CJIS. The DPS will immediately provide an automatic notification to TDCJ by email of any new criminal activity and will forward this information to Land Manor, Inc.

The Auditor reviewed the records of fifteen staff. Each of the records reviewed

contained all items required by the standard, which included documentation and criminal history check information.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 3, Section 5 (e) indicates Land Manor, Inc. shall 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. Land Manor, Inc. shall not promote anyone or enlist services of any contractor who may have contact with clients who meet the requirements of (d)(2-4 above).

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 2-3, Section 5 (a) & (i) indicates:

(a) All Land Manor, Inc. employees who have direct contact with clients are approved for hire through a NCIC/TCIC criminal background records check, including previous employers, conducted by the Texas Department of Criminal Justice.

(i) Land Manor, Inc. makes an effort 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 the preceding twelve months there were 29 people hired who may have contact with resident who had a criminal background check completed. The Auditor conducted a review of the new hires personnel records and verified that all the files contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 3, Section 5(h) indicates Land Manor, Inc. shall perform a criminal background record checks before enlisting the services of any contractor, in the event one is ever used, who may have contact with the client.

According to the PAQ, there are zero contractors who might have contact with resident.

Provision (e)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 3, Section 5(j) indicates Land Manor, Inc. does not perform record checks

every five years. During the initial criminal history check, each employee's information is entered into CJIS. The DPS will immediately provide an automatic notification to TDCJ by email of any new criminal activity and will forward this information to Land Manor, Inc.

Provision (f)

During the interview with the HRM, it was reported all applicants and employees who may have contact with resident are directly asked about previous misconduct described in paragraph (a) of this section in written applications and self-evaluations or interviews for hiring or promotions. Further, these questions are asked and answered in writing with employee signatures on an annual basis.

Provision (g)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 3, Section 5(f) & (g) indicates:

(f) All employees are required to disclose any such misconduct immediately. Omission regarding such misconduct or the provision of materially false information related to PREA shall be grounds for termination.

(g) Land Manor, Inc., imposes upon all employees and contractors a continuing affirmative duty to disclose any sexual abuse, sexual harassment or any allegation of misconduct related to paragraph (d) of this policy to their immediate supervisor within 24-hours of the allegation.

Provision (h)

Policy states that unless prohibited by law, all information in this provision would be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee would be shared upon request from an institutional employer for whom such employee has applied for work.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets the standard regarding hiring and promotion decisions.

115.218	Upgrades to facilities and technology
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Material Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Observations during on-site review

During the facility tour the auditor observed the cameras and security mirrors.

Interviews with the following

- Facility Head – Program Director (PD)

Through the interview process, the PD reported any construction, renovation or modification would be done with full consideration of all PREA standards. Further reporting there are meetings that would be held regarding any building or construction considerations and that safety and cameras, or other technologies would be discussed and considered at such meetings. During these meetings the executive staff would meet with all key staff and agency personnel to discuss any pertinent issues, such as Data/Reporting issues, Grievances, Disciplinary Reviews, Use of Force Incidents, Incidents of Sexual Abuse, as well as the analysis of key data such as overtime, leave time, morale, etc.

During the interview with the PD, it was indicated there was camera coverage in the facility, which is complimented by security mirrors for extra security.

Provision (a)

On the PAQ, the facility reported the agency/facility has not acquired new facilities or made substantial expansions or modifications of existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Number 6, a, indicates: 6. Upgrades to facilities and technology(corresponding to 115.218 PREA):

(a) When designing or acquiring a new facility and in planning any substantial expansion or modification of existing facilities, Land Manor, Inc. shall consider the effect of the design, acquisition, expansion, or modification upon Land Manor’s ability to protect clients from sexual abuse.

Provision (b)

On the PAQ, the facility reported the agency/facility has 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.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual

	<p>Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Number 6, b, indicates: 6. Upgrades to facilities and technology (corresponding to 115.218 PREA):</p> <p>(b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, Land Manor, Inc. shall consider how such technology may enhance Land Manor's ability to protect clients from sexual abuse.</p> <p>The agency/facility indicates the purchase/acquisition of better video monitoring systems is currently pending.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding upgrades to facility and technology.</p>
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115.221	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020 • Memorandum Agreement between Community Solutions, Inc (CSI) and The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Random Staff • SAFE/SANE Personnel • Facility Head - Program Director (PD) • Agency PREA Coordinator (APC) <p>Through the interview process random staff were able to articulate the rules of evidence, and their understanding of the process when a resident reports an alleged sexual abuse or sexual harassment incident. All staff interviewed were able to articulate the basic preservation of evidence component of both victim and abuser. They were also able to explain their responsibilities up to the point when they transfer responsibility to either investigative or medical staff.</p>

During the interview with the APC, she confirmed in the past 12-months there were zero residents transported for SAFE/SANE services.

Through the interview process the SAFE/SANE personnel indicated the Sexual Assault Nurse Examiner (SANE) provides timely, compassionate care to the sexual assault victim. This includes a forensic exam, prophylaxis for pregnancy and sexually transmitted diseases, photographic documentation, referrals for appropriate medical and psychological follow-up, as well as support and participation in legal proceedings. An advocate is provided for medical accompaniment for all SANE examinations through The Rape and Suicide Crisis Center of Southeast Texas. SAFE/SANE personnel confirmed the residents are not charged for the forensic exams.

During the interview process the APC indicated victim advocacy services are offered through contract and are built into the forensic exam process. During the examination, the resident meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through the advocate, in collaboration with mental health services.

Provision (a)

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020, p. 4, Section 8(a) indicates 8. Referrals of allegations for investigation. (corresponding to 115.222 PREA): (a) Land Manor, Inc. shall ensure that an administrative investigation is completed for all allegations of sexual abuse and sexual harassment and are referred for investigation to the Beaumont Police Department for criminal investigation, unless the allegations do not involve potentially criminal behavior.

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020, p. 4, Section 7 (a) - (b), indicates 7. Evidence protocol for forensic medical examinations. (corresponding to 115.221 PREA) (a) Land Manor, Inc. shall conduct an administrative investigation of all allegations of sexual abuse and sexual harassment. Land Manor, Inc. will follow all uniform-evidence collection procedures; (b) Land Manor, Inc. notify law enforcement asking them to utilize the proper protocol. The protocol shall be developmentally appropriate and adapted from the most recent edition of the DOJ's Violence Against Women Publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" or similarly comprehensive and authorized protocols developed after 2011.

On the PAQ, the agency/facility reported the facility is responsible for conducting administrative investigations. The local police are responsible for conducting criminal investigations, including resident-on-resident sexual abuse and staff sexual misconduct. The APC provides investigative assistance for those resident-on-resident sexual harassment administrative cases.

Provision (b)

The facility does not house youthful residents.

Provision (c)

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020, p. 4, Section 7(c), Land Manor, Inc. shall offer all victims of sexual assault a referral and access to the Rape and Suicide Crisis Center of Southeast Texas and/or Child Abuse & Forensic Services, Inc. to obtain any necessary services, including a forensic medical examination and/or victim advocate. Forensic medical exams are offered at no cost to the victim through Child Abuse & Forensic Services, Inc. Child Abuse & Forensic Services, Inc. utilize Sexual Assault Nurse Examiners (SANE) for examinations.

On the PAQ, the agency/facility reported all treatment services are provided to the victim without financial cost.

Provision (d)

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020, p. 4, Section 7(c), (c) Land Manor, Inc. shall offer all victims of sexual assault a referral and access to the Rape and Suicide Crisis Center of Southeast Texas and/or Child Abuse & Forensic Services, Inc. to obtain any necessary services, including a forensic medical examination and/or victim advocate. Forensic medical exams are offered at no cost to the victim through Child Abuse & Forensic Services, Inc. Child Abuse & Forensic Services, Inc. utilize Sexual Assault Nurse Examiners (SANE) for examinations.

As stated in Provision (c), a victim advocate is provided during the forensic medical examination.

The Memorandum Agreement between Land Manor-Melton Center and The Rape and Suicide Crisis Center of Southeast Texas, executed December 7, 2022, provides documentation that advocacy services are provided to the facility residents.

At the time of the audit, the information received regarding the allegations of sexual abuse and sexual harassment indicated there was zero sexual abuse and sexual harassment allegation received during the previous 12-months. Therefore, there was no documentation to review.

At the time of the audit, the information received indicated in the past 12-months there were zero forensic examinations completed.

Provision (e)

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020, p. 4, Section 7(d), indicates if requested by the client, a victim advocate, Land Manor, Inc. clinical staff member, or qualified community-based organization staff member shall accompany the client to any medical examination process and investigation

	<p>interviews.</p> <p>As stated in Provision (d) during the examination, the resident meets the victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/or requested.</p> <p>Provision (f)</p> <p>As reported in Provision (a) the facility is responsible for conducting administrative investigations. The local police are responsible for conducting criminal investigations, including resident-on-resident sexual abuse and staff sexual misconduct.</p> <p>Provision (g)</p> <p>Auditors are not required to audit this provision.</p> <p>Provision (h)</p> <p>As reported in Provision (d) victim advocacy services are offered through contract and are built into the forensic exam process.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding evidence protocol and forensic medical examinations.</p>
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115.222	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020 • Memorandum Agreement between Community Solutions, Inc (CSI) and The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022 <p>Interviews with:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) • Random Staff

- Investigative Staff

During the interview process the APC indicated all allegations are investigated. Administrative allegations are investigated by the APC. The ones which might be criminal in nature are investigated by local police, then referred to the appropriate jurisdiction for prosecution if it is deemed a criminal act was committed. If it is deemed a criminal act was not committed it is sent back to the agency/facility for administrative handling.

During the interview process, staff articulated their responsibility to report any suspicion, or knowledge of an allegation of sexual abuse and sexual harassment. Each reported they were required to make such a report immediately after becoming aware of it. They further stated they are to report to the Program Director or supervisor.

Through the interview process, investigative staff indicated all allegations are investigated. The allegations which are criminal in nature are fully investigated by the local police. If evidence supports criminal prosecution, prosecution is pursued. If not, it is kicked back to the facility for administrative procedures. All other allegations are investigated administratively in-house.

Provision (a)

Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 2020

pp. 4-5, Section 8 (a) - (d), indicates:

8. Referrals of allegations for investigation. (corresponding to 115.222 PREA)

(a) Land Manor, Inc. shall ensure that an administrative investigation is completed for all allegations of sexual abuse and sexual harassment and are referred for investigation to the Beaumont Police Department for criminal investigation, unless the allegations do not involve potentially criminal behavior.

1) Any staff who become aware of an alleged incident of sexual abuse/harassment are to immediately inform the Lead House Manager, who is to inform the Program Director, and document the incident accordingly in an Incident Report.

2) The Program Director is to contact local law enforcement

3) Law enforcement determines if the incident is a criminal matter. If so, law enforcement follows investigative procedures. In all incidents, criminal or not, the Program Director informs the PREA Coordinator who conducts an agency internal investigation.

4) Upon knowledge of allegations, the Program Director/designee or PREA

Coordinator shall immediately contact the TDCJ Contract Monitor within 1 hour and the EAC at the direction of the Contract Monitor. The allegation will also be reported to TDSHS within 24 hours.

(b) Land Manor, Inc Investigators shall:

1) Ensure that a criminal and/or administrative investigation is completed on all allegations of sexual abuse and/or sexual harassment.

2) Shall fully cooperate in any and all investigations.

3) As requested by local law enforcement, assist in gathering and preserving direct and circumstantial evidence. This may include collecting any available physical and DNA evidence and any available electronic monitoring data.

4) As requested by local law enforcement, may interview alleged victims, suspected perpetrators, and witnesses.

5) Shall review prior complaints and reports of sexual abuse involving the suspected perpetrator and report those to local law enforcement.

6) Document all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.

(c) Local law enforcement will take the lead in all criminal investigations and will refer any individual(s) for criminal prosecution. The PREA Coordinator will be the point of contact between Land Manor, Inc., and local law enforcement. The PREA Coordinator will ensure the investigators stay informed about the progress of the investigation and make this information available to the alleged victim.

(d) Land Manor, Inc. shall ensure that a written report is completed for all allegations of sexual abuse and sexual harassment. Staff shall document all reports, notifications, responses, outcomes, etc.

There were zero sexual abuse and sexual harassment allegations received during the previous 12-months. Therefore, there is no documentation to review.

In the past 12-months there were zero SAFE/SANE examinations.

Provision (b)

The policies regarding the agency/facility obligation to thoroughly investigate all matters relative to Sexual Abuse and Sexual Harassment are provided in Provision (a).

The agency/facility ensures all allegations are either followed up through the administrative or criminal investigation process. The policy and processes are published on the agency website, www.landmanor.org/PREA, as was verified by the Auditor.

	<p>Provision (c)</p> <p>As stated in Provision (a) the facility refers all administrative investigations to the Program Director who informs the PREA Coordinator who conducts an agency internal investigation.</p> <p>Provision (d)</p> <p>Auditors are not required to audit this provision.</p> <p>Provision (e)</p> <p>Auditors are not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets the standard, which addresses policies to ensure referral of allegations for investigations</p>
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115.231	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • PREA Training Documentation 2022/2023 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Staff <p>Each of the staff members interviewed recalled attending the initial PREA training when they were hired. The staff interviewed confirmed they receive annual, in-service PREA training, as well as additional staff meeting training.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 5, Section 9 indicates:</p>

9. Employee training. (corresponding to 115.231 PREA)

(a) Land Manor, Inc. shall train all employees who have contact with a client on:

- 1) The Zero-Tolerance Policy for sexual abuse and sexual harassment
- 2) How to fulfill their responsibility related to sexual abuse and harassment prevention, detection, reporting, and response policies and procedures
- 3) Client's right to be free from sexual abuse and harassment.
- 4) The right of clients and employees to be free from retaliation for reporting sexual abuse and harassment
- 5) The dynamics of sexual abuse and sexual harassment in confinement
- 6) The common reactions of sexual abuse and harassment victims
- 7) How to detect and respond to signs of threatened and actual sexual abuse
- 8) How to avoid inappropriate relationships with clients
- 9) How to communicate effectively and professionally with clients, including lesbian, gay, bisexual, transgender, intersex, or gender non-conforming client
- 10) How to comply with relevant laws to mandatory reporting of sexual abuse to outside authorities.

(b) Trainings shall be tailored to the gender of the client assigned to the facility.

(c) Refresher training shall be provided annually; employees who are reassigned from facilities housing the opposite gender shall be given additional training.

(d) Land Manor, Inc. shall document, through employee signature, that the employees understand the training they have received.

The facility's curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated training elements to facilitate retention of the required elements. The level or complexity of the training is dependent on the employee's classification with some specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed a total of 15 staff training records. Each record contained all relevant documentation to reflect the staff had met their initial PREA requirements. In addition, the Auditor also reviewed all the sign-in sheets for PREA training for the past 12 months which were confirmed by staff signatures, each of the employees

had acknowledged receiving the PREA training.

Each of the random staff interviewed recalled attending the initial PREA training when they were hired. All staff interviewed confirmed they receive PREA training annually and reminders at monthly staff meetings.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 5, Section 9 indicates: staff shall sign a training document acknowledging that they understand the training.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 5, Section 9 indicates: PREA training addresses factors pertaining to both males and females.

The training provided by the agency/facility is tailored specifically to the female resident population. The Auditor reviewed the training materials utilized for the staff. The training materials are consistent with this PREA standard. If an employee is reassigned from a facility that houses a different population composition, that employee is retrained or provided refresher training for the population make-up of the new facility prior to being placed in contact with the resident population.

As stated in Provision (a), the Auditor reviewed the sign-in sheets for the training verifying attendance of staff.

Provision (c)

According to the PAQ, staff receive training annually. Of the 15 staff presently assigned to the facility, the Auditor reviewed documentation that reflected all 15 or 100% of the staff have received PREA training in the past 12 months.

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging their attendance at training. The auditor reviewed copies of the staff meeting minutes as well as the attendance logs of those who attended the staff meetings for the past 12 months. Attendance logs confirmed all staff had attended PREA training.

Conclusion:

The training provided is thorough and comprehensive. Based upon the review and analysis of the available evidence, the Auditor has determined the agency/facility exceeds the standard which addresses policies regarding employee training.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 5-6, Section 10 states all volunteers or interns who will be working unaccompanied by staff with residents will receive the same training as noted above for employees

Provision (b)

According to the PAQ, the agency/facility reports one volunteer and individual contractor who have contact with residents who have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 5-6, Section 10 indicates contractors upon entering the facility will be briefed on the agency/facility PREA Policy. Contractors will be requested to sign a PREA Acknowledgement form noting that they have been provided with information on the zero-tolerance policy and reporting procedures.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 5-6, Section 10, indicates all volunteers and interns who will be working unaccompanied by staff shall sign an acknowledgment that they have received PREA training and that they understand the PREA policy.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the agency/facility meets the standard which addresses policies regarding volunteer and contractor training.

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Melton Center Residential Handbook, revised 2023
- PREA Posters
- Miscellaneous Training Materials

Observations during on-site review:

Orientation material, as well as the PREA Posters were observed during the on-site tour of the facility by the Auditor. The Auditor reviewed written materials in both English and Spanish.

The facility has a variety of PREA posters, in both English and Spanish. During the on-site tour, the Auditor observed these posters in every room throughout the facility.

Interviews with the following:

- Intake Staff
- Residents

Throughout the interview process intake staff confirmed residents are provided written PREA materials, a MC Residential Handbook, revised 2023, and information about the facility's zero-tolerance policy and ways to report upon arrival. The resident signs the acknowledgment form which is retained in the resident record.

During the interview process intake staff indicated residents receive their PREA training immediately upon arrival, prior to their bed assignment. They reported the residents are not allowed to leave the intake area until they have completed their initial PREA orientation.

During the interview process residents reported receiving written PREA materials, a MC Residential Handbook and information about the facility's zero-tolerance policy and ways to report. The Auditor reviewed 35 resident records for PREA Education documentation. In each of the records, the residents had received and signed for PREA information at intake. All residents who had been in the program 30-days had been re-assessed within 30 days of their 72-hour assessment. Likewise, they had all been provided with PREA Comprehensive Education within 30 days of arrival.

During the interview process residents were asked to briefly outline what they

learned during PREA training. Most responded with answers similar in nature and were generally: zero-tolerance for sexual abuse or harassment, how to report, to dial the PREA Hotline and call the number on the posters around the facility.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates during intake orientation, all residents will receive a resident handbook, and a facility handout containing information about PREA. All residents shall sign an acknowledgment that they have received the handbook and the PREA handout which contain the following information:

The facility has telephones designated for resident use. Using any of these telephones, a resident can call a PREA hotline to report an incident of sexual abuse or sexual harassment. The call is free of charge, not recorded and confidential. This was confirmed by the Auditor on the on-site tour.

A review of 35 resident records was conducted and the signed PREA acknowledgment document was part of every record.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates during the intake process residents shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Provision (b)

According to the PAQ during the past 12 months there were 310 residents admitted to the facility. Consequently, the facility provided PREA information, which included their right to be free from sexual abuse, as well as the policies and procedures for reporting to all 310 residents. The facility reported 100% of the residents admitted to their facility in the past twelve 12-months received the mandated information.

According to the PAQ, zero residents transferred from a different community confinement facility during the past 12 months. Zero residents transferred from a different community confinement facility, during the past 12 months, who received refresher information.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, number 9 b, indicates Land Manor, Inc. shall:

- 1) Provide refresher information in the event the client is released and then returns.
- 2) Provide client education in formats accessible to all clients, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well

as clients who have limited reading skills.

3) Maintain documentation of client participation in the education sessions

4) Ensure that key information is continuously readily available or visible to clients through posters or other written formats.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 6, Section 11 (2) indicates provide client education in formats accessible to all clients, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as clients who have limited reading skills.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Melton Center Residential Handbook, PREA handout, and all related material will be made available various formats to ensure those residents with limited English proficiencies, deaf, visually impaired, or otherwise disabled residents will be able to participate in all aspects of PREA.

As indicated in Provision (b) 100% of residents who entered the facility during the past 12-month period received the required PREA training. This training at intake is facilitated through staff going over material and answering any questions the resident may have. Upon arrival, the resident is also provided a Melton Center Residential Handbook, revised 2023 and PREA information. At the end of the orientation process is a question-and-answer period to reinforce retention of the information presented.

As indicated in Provision (b) the intake staff provide the PREA information immediately upon arrival into the facility. Interviews with intake staff revealed that upon arrival at the facility residents are given orientation materials, including PREA related materials, before being assigned a bed. This is a requirement for all residents, whether they are a new intake or a transfer from another facility.

Provision (d)

As stated in previous provisions, all residents are required to sign the PREA Education Checklist once they have completed PREA education. A copy of this acknowledgment is retained in the resident record as documentation.

As stated in provision (a), a review of 35 resident records was conducted, and the signed acknowledgment documentation was in every resident record.

Provision (e)

Using varying formats, the resident population receives valuable information in user friendly, comprehensible ways. The Melton Center Residential Handbook is an excellent tool which specifically lays out the prevention of sexual violence, zero-

	<p>tolerance policy and includes multiple methods residents can seek assistance regarding sexual violence.</p> <p>In interviews with residents, many reported the PD, and other staff check with them formally and informally about PREA issues and practices.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility exceeds the standards for resident education.</p>
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115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) • Investigative Staff <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 indicated that any criminal act is referred and reported to local law enforcement.</p> <p>The agency/facility has two investigators. They are the APC and Program Director who are responsible for all administrative investigations. The APC and Program Director participated in and successfully completed the mandated employee PREA training during pre-employment orientation and training. Subsequently they completed investigative trainings:</p> <ul style="list-style-type: none"> • November 13, 2020 - PREA Investigating Training Sexual Abuse in a Confinement Setting: Advanced Investigations <p>All PREA allegations that are criminal in nature are investigated by the local police</p>

	<p>department. These agencies train their officers in investigation in a confinement setting. is one of the agencies that trained CSI's APC in investigation in confinement.</p> <p>Provision (b)</p> <p>This is addressed in Provision (a).</p> <p>Through a review of training records and an interview with the investigator, the Auditor was able to confirm that all training requirements have been met.</p> <p>Provision (c)</p> <p>The Auditor reviewed documentation, certificates, and lesson plans for the investigative training courses completed by the agency investigators.</p> <ul style="list-style-type: none"> • November 13, 2020 - PREA Investigating Training Sexual Abuse in a Confinement Setting: Advanced Investigations <p>A review of the lesson plans shows these trainings meet the requirement of this standard.</p> <p>Provision (d)</p> <p>Auditors are not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined the agency/facility meets the standard which addresses policies regarding specialized training: investigations.</p>
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115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Observations During On-Site Tour</p> <p>During the facility tour the auditor did not observe any medical or mental health</p>

	<p>practitioners.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Program Director <p>Through the interview process the Program Director indicated the agency/facility does not employ medical or mental health practitioners.</p> <p>Provision (a)</p> <p>According to the PAQ the agency/facility does not employ medical or mental health practitioners.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, number 13, a, indicates Land Manor, Inc. does not employ mental health care or medical practitioners.</p> <p>Provision (b)</p> <p>As indicated in Provision (a), the agency/facility does not employ medical or mental health practitioners.</p> <p>Provision (c)</p> <p>As indicated in Provision (a), the agency/facility does not employ medical or mental health practitioners.</p> <p>Provision (d)</p> <p>As indicated in Provision (a), the agency/facility does not employ medical or mental health practitioners.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies regarding specialized training: medical and mental health care.</p>
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115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

On-site Observations

During the on-site audit, the Auditor discussed screening processes with staff. The staff was able to guide the Auditor through the screening process, by explaining the process that each client is required to participate in during the initial screening and ongoing screening processes.

Interview with the following:

- Staff Responsible for Risk Screening
- Residents

All clients interviewed recalled being asked questions relative to their concern about sexual abuse and if they felt like they were going to harm themselves. A review of client records revealed all clients had been asked the questions on the day they arrived.

All clients interviewed recalled being asked questions specific to previous Sexual Abuse & Harassment within three days of their arrival at the facility. A review of client records revealed all clients had been asked the questions on the day they arrived.

Through the interview process, the staff responsible for risk screenings indicated all clients are screened within 72 hours of arrival. They are reassessed within 30 days of the initial 72-hour assessment.

Provision (a)

The PAQ indicates, the agency/facility has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other clients.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 6-7, Section 14, a, indicates all clients shall be assessed during an intake screening within 48 hours of admission and upon transfer to another facility for their risk of being sexually abused by other clients or sexually abusive towards other clients. Such assessments shall be conducted using an objective screening tool. In addition to a specific screening instrument, the staff documents the bulleted items in the psychosocial assessment.

Provision (b)

According to the PAQ, 308 clients entered the facility (either through intake or

transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other clients within 72 hours of their entry into the facility.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 6, Section 14(a) indicates the listed policies all clients must be screened within 72- hours of arrival.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates Risk of Sexual Abuse Victimization or Sexual Abusiveness based on the PREA Risk Assessment Tool is to be completed within 72 hours of admission. A PREA Reassessment for each client will take place prior to the 29th day after admission. The re-assessment process shall include a 2nd assessment completed by the appropriate staff, which shall incorporate any additional and relevant information received after the initial assessment. Re-assessment will also occur after a request from the referral source, an incident of sexual abuse or any other information gathered that bears on the client's risk of victimization or abusiveness.

Clients have the right to not answer or fully disclose information with questions regarding whether the client has a mental, physical, or developmental disability; the client's sexual orientation including transgender, intersex, or gender non-conforming; whether the client has been a victim of sexual harassment or abuse; and the client's own perception of vulnerability. Clients will not receive any discipline for not answering questions that cover this subject matter.

Staff members who conduct risk screenings utilize the PREA Risk Assessment Tool. The Auditor reviewed copies of the PREA Risk Assessment Tool in the client records for every client in the program. All had been completed within the appropriate time frame.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 6, Section 14(b) indicates the intake screening shall consider, at a minimum, the following criteria to assess client's risk of sexual victimization:

1. Whether the clients has a mental, physical, or developmental disability
2. The age of the client
3. The physical build of the client
4. Whether the client has previously been incarcerated
5. Whether the client's criminal history is exclusively non-violent

6. Whether the client has prior convictions for sex offenses against an adult or child
7. Whether the client is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
8. Whether the client has previously experienced sexual victimization
9. The client's own perception of vulnerability

The Auditor reviewed the PAQ which indicated in the past 12 months, 100% or 308 clients were screened for the risk of sexual victimization or sexual abusiveness within 72-hours of their entry into the facility.

The Auditor reviewed 38 client records to ensure they were screened upon arrival. All 38 records had verification that the initial screening had occurred within 72 hours of arrival.

As stated in (a), the Auditor was able to specifically question the staff responsible for screening about the required questions. The staff replied that all the PREA related questions are asked during initial intake and ongoing screenings.

Provision (e)

The Auditor reviewed the PREA Risk Assessment Tool and compared the questions with the requirements for Provision (e). All items required for Provision (e) have been included in the screening instrument, which addresses Possible Sexual Predatory Risk Factors.

Provision (f)

The Auditor reviewed the PAQ which indicated that within the past 12 months, 100% or 282 clients have been reassessed for the risk of victimization or risk of abusiveness of other clients within 30-days of their entry into the facility. All were reassessed within the 30-day time frame.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 7, Section 14(d), indicates within 30 days from the client's arrival at the facility, the facility will reassess the client's risk of victimization or abusiveness based upon any additional relevant information received since the intake screening; and when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the client's risk of sexual victimization or abusiveness.

All clients interviewed recalled being asked questions relative to this standard. Most indicated they recalled being interviewed within a couple weeks after arrival. A review of the records revealed all 38 clients had been reassessed within thirty days.

Out of the 38 client records which were reviewed by the auditor, those clients who had been in the program 30 days or longer had been reassessed. These finished

screening documents were completed by different staff, with each instrument being finalized consistent with the standard.

Provision (g)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates in part clients shall also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the client's risk of sexual victimization or abusiveness.

As stated in (a) the Auditor was able to speak with screening staff who were able to walk the Auditor through the intake screening and classification process. Screening staff indicated they monitor the client population, and will reassess when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that may have bearing on the client's risk of victimization or abusiveness.

Provision (h)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 6, Section 14(e) indicates clients may not be disciplined for refusing to answer, or for not disclosing complete information in response to, specific questions asked pursuant to the U.S. DOJ standards.

Screening staff indicated they do not discipline any client for their refusal to answer these questions during an assessment, rather each indicated he/she would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the client chose not to respond.

Provision (i)

As stated in (a), the Auditor interviewed screening staff. The screening staff indicated access to the client's screening information is secured, with controlled access by administrative staff.

During the interview process the Auditor learned administrative staff and programming staff have access to the screening information collected during intake and screenings. Everyone else is on a need-to-know basis.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard which addresses Screening for Risk of Sexual Victimization and Abusiveness.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Resident Files

Interview with the following:

- Agency PREA Coordinator (APC)
- Staff Responsible for Risk Screening

Through the interview process the APC indicated that neither the agency or facility are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex (LGBTI) residents. All LGBTI residents are housed within the general population.

Through the interview process with the APC and staff responsible for screening, all specified the transgender or intersex resident's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These residents are interviewed further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.

Through the interview process the APC and the staff responsible for risk screening, each indicated the transgender or intersex resident's views of their own safety is given serious consideration when providing showering options. In addition, they clarified, transgender or intersex residents would be able to shower separately from other residents by utilizing alternate shower times.

Through the interview process the staff who are responsible for risk screening, indicated because of the assessment procedures being utilized, each resident is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each individual resident when making classification and housing decisions.

Through the interview process the staff who are responsible for risk screening, indicated the transgender or intersex residents view of their own safety is taken into serious consideration when determining housing placements and programming assignments. In addition, the staff who are responsible for risk screening indicated because of the assessments that are utilized, each resident is evaluated individually.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 7, Section 15 (a) - (d), indicates:

(a) Land Manor, Inc. shall use information from the risk screening shall be used to inform housing, bed, work, education, and program assignments to maintain separation of those clients at high risk of being sexual victimized from those at high risk of being sexually abusive.

(b) Land Manor, Inc. shall make individualized determination about how to ensure the safety of each client and will determine on a case-by-case basis whether a placement would ensure the client's health and safety, and whether the placement would present management or security problems.

(c) A transgender or intersex client's own view with respect to his or her own safety shall be given serious consideration. Transgender and intersex clients shall be given the opportunity to shower separately from other clients.

(d) Land Manor, Inc. shall not place any client in dedicated facilities, units, or wings solely based on their sexual orientation.

The APC indicated every assessment completed by staff is factored into the placement and programming of each resident. Further the resident's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every resident, especially those at high risk of being sexually victimized, are separated from those at high risk of being sexually abusive.

Following a review of 38 resident records, the Auditor was able to verify that the information from these assessments was being utilized in the various classification decisions made by staff.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 7, Section 15 (a) - (d), as outlined in provision (a).

Staff who are responsible for risk screening indicated that because of the assessment procedures being utilized, each resident is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each individual resident when making classification and housing decisions.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 p. 7, Section (b) & (c) indicates:

(b) Land Manor, Inc. shall make individualized determination about how to ensure the safety of each client and will determine on a case-by-case basis whether a placement would ensure the client's health and safety, and whether the placement would present management or security problems.

(c) A transgender or intersex client's own view with respect to his or her own safety shall be given serious consideration. Transgender and intersex clients shall be given the opportunity to shower separately from other clients.

There were no transgender or intersex residents in the program at the time of the audit. Therefore, no interviews were conducted.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 states in part, transgender, and intersex residents' own views with respect to his or her safety shall be given serious consideration in housing assignments.

Provision (e)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 states in part transgender and intersex residents shall be given the opportunity to shower separately from other residents.

As previously identified, each of the bathrooms has shower stalls and toilets that are not easily seen by staff. The random staff who were interviewed indicated that if a transgender or intersex resident asked to shower separately, they would arrange a separate shower time from the other residents. Additionally, a transgender or intersex resident would be allowed to go into the bathroom and lock the outside door to ensure no one entered while the resident was showering.

Provision (f)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 states in part transgender and intersex residents shall not be placed in a dedicated unit solely based on their identification status.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets the standard requiring the use of screening information.

115.251	Resident reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Melton Center Transitional treatment Center Client Handbook, revised 2023
- PREA Reporting Phone List
- PREA Poster in English and Spanish

Observations during on-site review

- During the on-site portion of the audit, the Auditor observed PREA posters in both English and Spanish throughout the facility. These posters were observed in each housing unit, communal areas, main hallways, intake holding area, dining room, etc.
- During the on-site portion of the audit, the Auditor observed PREA information was posted on the walls.
- The PREA hotline number was posted on the wall beside the resident telephones.
- Ways to report PREA allegations were posted on the walls.
- Key elements of the PREA policy such as zero tolerance and the right to be free from retaliation were posted on the walls.

During the on-site tour, each phone that was tested was in working order and could be used to call out.

Interview with the following:

- PREA Compliance Manager (PCM)
- Random Staff
- Random Residents

Through the interview process the staff indicated they would accept a report or allegation from the resident and provide it to their supervisor for further direction. They each also reported residents can report several different ways which includes telling a staff member, calling the PREA telephone number posted throughout the facility, or telling a family member. Staff interviewed stated residents can privately report sexual abuse or sexual harassment as well, by writing the PREA Ombudsman.

Through the interview process the residents reported they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the hotline number, contacting the PCM, having family members contact the institution, contacting a staff member, and "writing to the address on the poster." Most indicated they would tell a staff member first.

Through the interview process residents reported they were familiar with an outside agency and said they knew they offered services, but not all were clear on exactly what services they offered.

Through the interview process staff indicated they could privately report sexual abuse of residents to their supervisor, the facility PCM, and the PREA Coordinator.

Provision (a):

According to the PAQ the agency/facility has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other residents or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incident.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 7-8, Section 16, a-c, indicates:

(a) Land Manor, Inc. shall provide multiple internal ways (verbal and letter) for clients to privately report sexual abuse and sexual harassment, retaliation by other client or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Land Manor, Inc. shall maintain postings visible to all clients specifying multiple avenues for reporting alleged sexual abuse and sexual harassment. Postings will include options to report allegations to facility staff, TDCJ, and the Beaumont Police Department, including contact information. Clients will also be provided a copy of this information upon intake.

(b) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Verbal reports are to be documented within 24 hours.

(c) Staff may privately report sexual abuse and sexual harassment of clients verbally or via written statement to the Program Director/designee or PREA Coordinator (Land Manor, Inc. Quality Management Coordinators).

Melton Center Residential Handbook, p 34 states in part:

(a) Land Manor, Inc. shall provide multiple internal ways (verbal and letter) for clients to privately report sexual abuse and sexual harassment, retaliation by other client or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Land Manor, Inc. shall maintain postings visible to all clients specifying multiple avenues for reporting alleged sexual abuse and sexual harassment. Postings will include options to report allegations to facility staff, TDCJ, and the Beaumont Police Department, including contact information. Clients will also be provided a copy of this information upon intake.

(b) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Verbal reports are to be documented within 24 hours.

(c) Staff may privately report sexual abuse and sexual harassment of clients verbally or via written statement to the Program Director/designee or PREA Coordinator.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 7-8, Section 16, a, indicates Land Manor, Inc. shall provide multiple internal ways (verbal and letter) for clients to privately report sexual abuse and sexual harassment, retaliation by other client or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Land Manor, Inc. shall maintain postings visible to all clients specifying multiple avenues for reporting alleged sexual abuse and sexual harassment. Postings will include options to report allegations to facility staff, TDCJ, and the Beaumont Police Department, including contact information. Clients will also be provided a copy of this information upon intake.

The facility does not detain residents solely for civil immigration purposes.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 7-8, Section 16, b, indicates staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Verbal reports are to be documented within 24 hours.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 16(c) indicates staff may privately report sexual abuse and sexual harassment of clients verbally or via written statement to the Program Director/designee or PREA Coordinator (Land Manor, Inc. Quality Management Coordinators).

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility exceeds the standard relative to resident reporting.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Interviews with the following:

- Staff
- Residents

Through formal interviews with residents, it was reported they could file a grievance to report an allegation of sexual abuse. The Auditor asked each resident interviewed if he could file a grievance alleging an imminent risk of sexual abuse. The residents were aware of the grievance process and no resident interviewed had done so. Most residents stated they would immediately notify a staff member as that is the quickest way to report. Residents stated they might use the hotline number. Each resident was asked if he was required to give his name when alleging sexual abuse. All residents were aware they could submit an allegation anonymously.

Through the interview process with staff confirmed that residents could submit grievances alleging a risk of imminent sexual abuse or to report an allegation of sexual abuse. Staff articulated the procedures for submitting these emergency grievances alleging a risk of imminent sexual abuse. Supervisors were aware of the time limits in response to an emergency grievance alleging an imminent risk of sexual abuse.

Provision (a):

In the PAQ the facility reported the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse and sexual harassment. The PAQ indicates the facility had seventeen grievances filed in the past twelve months that alleged sexual abuse.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 17, a - d, indicates:

(a) Land Manor, Inc. will not impose a time limit on reporting allegations of sexual abuse and sexual harassment, nor will clients be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse and sexual harassment and may submit a grievance without submitting it to a staff member who is the subject of the complaint, and said

grievance will not be referred to a staff member who is the subject of the complaint.

(b) Land Manor, Inc. will make a final determination regarding allegations of sexual abuse and sexual harassment within 7 days of the submission of the grievance, unless extenuating circumstances are present which interfere with the determination of validity of the allegation. If necessary, Land Manor, Inc. will request an extension of time to respond, of up to 14 days, from the Texas Department of Criminal Justice, and will notify the client in writing of any such extension and provide a date by which a decision will be made.

(c) Third parties, including but not limited to, fellow clients, staff members, family members, etc., will be permitted to assist clients in filing requests for administrative remedies relating to allegations of sexual abuse and sexual harassment and to file such requests on behalf of clients. If the client declines to have the request processed on his or her behalf, Land Manor, Inc. shall document the client's decision.

(d) Emergency grievances will be accepted at any time in which a grievance alleges that a client is subject to a substantial risk of imminent sexual abuse. In such cases, staff shall immediately forward the grievance to the Program Director/designee or PREA Coordinator regardless of the time of day/night, and immediate safety measures (bed assignment change, programmatic change, etc.) will be taken until such time as an investigation can be conducted. The Program Director/designee or PREA Coordinator shall provide an initial response within 48 hours and shall issue a final determination within 5 calendar days to include the determination if the client is at substantial risk of imminent sexual abuse and the action taken.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 17(a) indicates Land Manor, Inc. will not impose a time limit on reporting allegations of sexual abuse and sexual harassment, nor will clients be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse and sexual harassment and may submit a grievance without submitting it to a staff member who is the subject of the complaint, and said grievance will not be referred to a staff member who is the subject of the complaint.

Provision (d)

According to the PAQ in the past 12 months, there were zero grievances filed that alleged sexual abuse.

According to the PAQ in the past 12 months, there were zero grievances alleging sexual abuse that reached final decision within 90 days after being filed.

According to the PAQ in the past 12 months, there were zero grievances alleging

sexual abuse that involved extensions because final decision was not reached within 90 days.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 17(b) indicates Land Manor, Inc. will make a final determination regarding allegations of sexual abuse and sexual harassment within 7 days of the submission of the grievance, unless extenuating circumstances are present which interfere with the determination of validity of the allegation. If necessary, Land Manor, Inc. will request an extension of time to respond, of up to 14 days, from the Texas Department of Criminal Justice, and will notify the client in writing of any such extension and provide a date by which a decision will be made.

During the on-site review of documentation, the Auditor reviewed investigation records in which the allegation was reported through the grievance mechanism and confirmed all time frames had been met.

Provision (e)

According to the PAQ there were zero grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident's decision to decline.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 17(c) indicates third parties, including but not limited to, fellow clients, staff members, family members, etc., will be permitted to assist clients in filing requests for administrative remedies relating to allegations of sexual abuse and sexual harassment and to file such requests on behalf of clients. If the client declines to have the request processed on his or her behalf, Land Manor, Inc. shall document the client's decision.

Provision (f)

According to the PAQ there were zero emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months.

According to the PAQ there were zero grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 8, Section 17 (d) indicates emergency grievances will be accepted at any time in which a grievance alleges that a client is subject to a substantial risk of imminent sexual abuse. In such cases, staff shall immediately forward the grievance to the Program Director/designee or PREA Coordinator regardless of the time of day/night, and immediate safety measures (bed assignment change, programmatic change, etc.) will be taken until such time as an investigation can be conducted. The

	<p>Program Director/designee or PREA Coordinator shall provide an initial response within 48 hours and shall issue a final determination within 5 calendar days to include the determination if the client is at substantial risk of imminent sexual abuse and the action taken.</p> <p>Provision (g)</p> <p>According to the PAQ there were zero resident grievances alleging sexual abuse that resulted in disciplinary action by the agency/facility against the resident for having filed the grievance in bad faith.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 indicates in part a resident may be disciplined for filing a grievance related to alleged sexual abuse only when the investigation determines the resident filed the grievance in bad faith.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding exhaustion of administrative remedies.</p>
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115.253	Resident access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Melton Center Transition Treatment Center Residential Client Handbook, revised 2023 • Land Manor Memorandum of Understanding, with The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022 • PREA Posters – English and Spanish <p>Observation -site review</p> <p>During the tour of the facility, the Auditor evaluated pay phones to ensure they worked. Each telephone checked functioned appropriately. The phones are checked once a day by an intermediate or higher-level staff member to make sure they are in working order.</p>

During the tour of the facility, the Auditor observed PREA posters and paintings on the walls throughout the facility. These posters around the facility as well as the Melton Center Transition Treatment Center Residential Client Handbook, revised 2023 let residents know they can notify the PCM, or other staff member, of any incident of sexual abuse or sexual harassment.

Interviews with the following:

- Residents

Each resident interviewed, readily admitted there was a telephone number and address available to them to contact someone in the event of sexual abuse or sexual harassment. Further each reported the call was confidential.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 8-9, Section 18 indicates (a) the facility shall offer all client victims of sexual assault a referral and access to the Rape and Suicide Crisis Center of Southeast Texas and Child Abuse & Forensic Services, Inc. Clients shall be referred to the above services and provided with mailing addresses and telephone numbers; reasonable communication between the client and these organizations shall be made in as confidential a manner as possible. In the event the rape crisis center is not available to provide victim advocate services immediately, Land Manor, Inc. shall refer the client to other available local resources (such as Family Services or Victim's Assistance Program).

(b) Land Manor, Inc. shall attempt to enter memoranda of understanding with community service providers that are able to provide clients with confidential emotional support services related to sexual abuse and shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

On the PAQ the facility reported it provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The Land Manor Memorandum of Understanding, with The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022, document the procurement of community services for residents in the facility. The facility has given the residents a mailing addresses and telephone number (including a toll-free number) for a local rape crisis organization.

Additionally, the agency/facility enables reasonable communication between residents and this organization in as confidential a manner as possible.

Provision (b)

According to the PAQ the facility tells residents the extent to which communications will be monitored and the limits of confidentiality due to mandatory reporting laws.

	<p>Provision (c)</p> <p>According to the PAQ, the agency/facility has a memorandum of understanding with the Rape and Suicide Crisis Center of Southeast Texas.</p> <p>The Land Manor Memorandum of Understanding, with The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022, document the procurement of community services for residents in the facility. This MOU is to provide the residents with access to outside support services related to sexual abuse. The Auditor was provided with a copy of the agreement to review.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding resident access to outside confidential support services.</p>
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115.254	Third party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Melton Center Transition Treatment Center Residential Client Handbook, revised 2023 • www.landmanor.org/PREA <p>Provision (a)</p> <p>On the PAQ, the facility reported there is access to third-party reporting through their agency website www.landmanor.org/PREA</p> <p>According to the PAQ the agency/facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 19 indicates Land Manor, Inc. shall accept third-party reports of sexual abuse and sexual harassment and shall make reporting procedures on behalf of a client available through request to the Program Director/designee or PREA Coordinator. (Provide link to website for 3rd party reporting.)</p>

	<p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding third party reporting.</p>
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115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) • Facility Head – Program Director (PD) • Staff <p>Through the interview process staff indicated they were aware of this requirement and were able to explain how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e., their supervisor, medical staff, etc. All staff indicated PREA related allegations and reports go to the PCM, who then notifies the investigative staff.</p> <p>Through the interview process the Program Director and the APC indicated they were aware of this requirement and would report any abuse allegations to the appropriate agency, as required by law, as well as the PCM and the appropriate investigators.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(a) indicates Land Manor, Inc. shall require all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against client or staff who reported such an incident; and any staff neglect or</p>

	<p>violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Provision (b)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(b) indicates staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>Provision (c)</p> <p>The facility does not employ medical and mental health practitioners.</p> <p>All community medical and mental health practitioners who provide services to the residents have a duty to report, as well as the limitations of confidentiality.</p> <p>Provision (d)</p> <p>All community medical and mental health practitioners who provide services to the residents, in accordance with CMHC policies, are required to obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18. If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.</p> <p>Provision (e)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(a) indicates Land Manor, Inc. shall require all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against client or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff and agency reporting duties.</p>
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115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Interviews with the following:

- Agency PREA Coordinator (APC)
- Facility Head - Program Director (PD)
- Staff

Through the interview process staff indicated they were aware of this requirement and were able to explain how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e., their supervisor, medical staff, etc. All staff indicated PREA related allegations and reports go to the PCM, who then notifies the investigative staff.

Through the interview process the Program Director and the APC indicated they were aware of this requirement and would report any abuse allegations to the appropriate agency, as required by law, as well as the PCM and the appropriate investigators.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(a) indicates Land Manor, Inc. shall require all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against client or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(b) indicates staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Provision (c)

The facility does not employ medical and mental health practitioners. All community medical and mental health practitioners who provide services to the residents have

	<p>a duty to report, as well as the limitations of confidentiality.</p> <p>Provision (d)</p> <p>All community medical and mental health practitioners who provide services to the residents, in accordance with CMHC policies, are required to obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18. If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.</p> <p>Provision (e)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 20(a) indicates Land Manor, Inc. shall require all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against client or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff and agency reporting duties.</p>
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115.263	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) • Facility Head - Program Director (PD)

During the interview process the APC and the PD confirmed any notification received regarding a PREA incident, whether it be sexual abuse or sexual harassment or sexual misconduct that occurred within any facility will be investigated.

The PD and the APC both indicated once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately investigated. If the investigation is administrative, it is handled by the APC. If at any point the investigation deems the allegation might be criminal in nature it is turned over the Beaumont Police Department for investigation

Provision (a)

According to the PAQ during the past 12 months, the facility received zero allegations the that a resident was abused while confined at another facility:

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 9, Section 22, a-b, indicates (a) upon receiving an allegation that a client was sexually abused while confined at another facility, the Program Director/ Designee shall notify the head of the facility where the alleged abuse occurred no later than 72 hours after receiving the allegation and shall document that it has provided such notification.

(b) Should Land Manor, Inc. facilities receive such notification, the Program Director/ designee or PREA Coordinator shall ensure that the allegation is investigated according to the procedures delineated within this policy.

Provision (b)

This is addressed in Provision (a)

Provision (c)

This is addressed in Provision (a)

Provision (d)

During the interview process the APC and the PD confirmed any notification received regarding a PREA incident, whether it be sexual abuse or sexual harassment or sexual misconduct that occurred within any facility will be investigated.

The PD and the APC both indicated once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately investigated. If the investigation is administrative, it is handled by the APC. If at any point the investigation deems the allegation might be criminal in nature it is turned over the Beaumont Police Department for investigation

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has

	determined the agency/facility meets every provision of the standard regarding reporting to other confinement agencies.
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115.264	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Facility Head - Program Director (PD) • First Responders <p>Through the interview process, the Program Director indicated first responder staff have been trained in the PREA process, and frequent training is conducted to ensure competency and compliance.</p> <p>Through the interview process staff were consistently able to articulate to the Auditor, step-by-step, how to respond to a PREA incident. Staff were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident.</p> <p>Through the interview process custody staff first responders confirmed training in the PREA process through annual in-service training, on the job training, staff meetings and turnouts. The USPPM frequently reminds them of PREA policies and speaking with them regarding the importance of PREA and sexual safety.</p> <p>Through the interview process non-custody staff indicated they would notify custody staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until custody staff arrived. Each verbalized the importance of, as well as their understanding of the need for confidentiality in all cases. Each staff member had their PREA card on them, which reflects step by step what to do in the event of a PREA situation.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual</p>

Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 9-10, Section 23 indicates that upon learning of an allegation that a client was sexually abused, the first staff member to respond to the report shall be required to:

1. Separate the alleged victim and abuser.
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, request that the alleged victim not take any actions to destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
3. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any action that could destroy physical evidence, including, as appropriate washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 states in part after learning of an allegation that a resident was sexually abused, the first staff responding to the report shall:

- a. Notify a security supervisor;
- b. Separate the alleged victim and assailant;
- c. Preserve and protect the crime scene, if applicable, until appropriate steps can be taken to collect any evidence;
- d. Be required to request that the alleged victim not take any actions that could destroy physical evidence, including 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.
- e. Ensure that the alleged abuser does 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.

The PAQ indicated the facility had zero allegations for alleged sexual abuse in the past 12-months.

Provision (b)

The PAQ indicated the facility had zero allegations for alleged sexual abuse in the past 12-months.

The Auditor's review of the PREA training curriculum that all staff, volunteers, and contractors received, identifies whoever received the information first, as a First Responder, including staff, volunteers, and contractors. As a first responder these individuals are trained to take steps to isolate and contain the situation, secure the

	<p>scene, separate the alleged victim from the alleged perpetrator and remove all uninvolved parties.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff first responder duties.</p>
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115.265	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Land Manor, Inc. Sexual Abuse Coordinated Response Plan, undated. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Facility Head - Program Director (PD) <p>Through the interview process the PD confirmed the Land Manor, Inc. Sexual Abuse Coordinated Response Plan, undated breaks down what the various responsibilities are for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on-the-job training. Further the staff have access to the Land Manor, Inc. Sexual Abuse Coordinated Response Plan, undated, which gives step-by-step instructions for first responders, as well as other staff, and states exactly the responsibilities of each staff member through every step of the process.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 24, a, 1-5 indicates upon receiving an allegation of sexual abuse and sexual harassment, the Program Director/designee or PREA Coordinator will coordinate with staff and client to ensure that required procedures are followed, to include:</p> <ol style="list-style-type: none"> 1. Separation of alleged victim and alleged abuser.

	<ol style="list-style-type: none"> 2. Notification to the TDCJ Contract Monitor within 1 hour, EAC at the direction of the Contract Monitor, and Beaumont Police Department, if the client wishes to provide a report. The allegation will also be reported to TDSHS within 24 hours. 3. Securing of any physical evidence 4. Thorough investigation 5. Appropriate referrals provided for the client such as medical exam, mental health services, pregnancy testing, victims advocate, etc. <p>Land Manor Sexual Abuse Coordinated Response Plan, undated, is a thorough and comprehensive plan. It contains detailed response actions for staff first responders, supervisors, investigators, and facility leadership. It lists a chain of command and delegates responsibilities for each step of the process.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility exceeds the standard regarding coordinated response.</p>
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115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Facility Head - Program Director (PD) <p>Through the interview process the PD indicated Land Manor, Inc. doe not enter into/ renew any agreement that limits its ability to remove alleged staff sexual abusers from contact with clients pending the outcome of an investigation or determination of disciplinary actions to be taken.</p> <p>Provision (a)</p>

	<p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 25, explains Land Manor, Inc. shall not enter into/renew any agreement that limits its ability to remove alleged staff sexual abusers from contact with clients pending the outcome of an investigation or determination of disciplinary actions to be taken.</p> <p>Provision (b)</p> <p>Auditors are not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding preservation of ability to protect residents from contact with abusers.</p>
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115.267	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) • Facility Head - Program Director (PD) <p>Through the interview process the PD revealed there are multiple measures used to protect residents and staff from retaliation. These measures include considering and monitoring if the resident is being given changes in housing assignments, work assignments or an increase in disciplinary reports. The monitoring of staff includes watching for negative performance reviews or work reassignments.</p> <p>Through the interview process the APC indicated retaliation is not tolerated. The PD emphasizes to staff and residents that they are free to speak about PREA issues without fear of retaliation. If retaliation does occur, prompt action is taken against those responsible for the retaliation.</p> <p>Provision (a)</p>

According to the PAQ, the APC and the PD have been identified as the individuals who are primarily responsible for monitoring retaliation.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, a-f, indicates:

(a) Land Manor, Inc. shall protect all clients and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other clients or staff. The PREA Coordinator shall be in charge of monitoring retaliation.

(b) The PREA Coordinator will investigate all reports of retaliation towards clients/ staff who report sexual abuse and sexual harassment or cooperate with such investigations.

(c) If any other individual expresses a fear of retaliation, Land Manor, Inc. shall respond appropriately to protect that individual against retaliation. Such measures may include housing changes/transfers for client victims/abusers, removal of alleged staff/ abusers from contact with victims, and emotional support services for clients/staff in fear of retaliation.

(d) The Program Director/PREA Coordinator shall monitor (for 90 days after a report) the conduct/treatment of clients or staff who report sexual abuse and of clients who alleged sexual abuse to identify any retaliation and shall act promptly to remedy any such retaliation. Monitoring will continue beyond 90 days if the initial monitoring indicates a continuing need.

(e) If any individual who cooperates with an investigation expresses fear of retaliation, Land Manor, Inc. shall respond appropriately to protect that individual against retaliation.

(f) Land Manor, Inc.'s obligation to monitor shall terminate if it is determined that the allegation is unfounded.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, the Program Director/PREA Coordinator shall monitor (for 90 days after a report) the conduct/treatment of clients or staff who report sexual abuse and of clients who alleged sexual abuse to identify any possible retaliation and shall act promptly to remedy any such retaliation.

Monitoring will continue beyond 90 days if the initial monitoring indicates a continuing need.

Provision (c)

According to the PAQ, the APC and PD monitor for retaliation for a period of 90-days, unless further monitoring is needed. The PAQ also indicated there were zero

instances of retaliation in the past 12 months.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, the PREA Coordinator will investigate all reports of retaliation towards clients/staff who report sexual abuse and sexual harassment or cooperate with such investigations.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, if any individual who cooperates with an investigation expresses fear of retaliation, Land Manor, Inc. shall take appropriate measures to protect that individual against retaliation.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, Land Manor, Inc.'s obligation to monitor shall terminate if it is determined that the allegation is unfounded.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, the PREA Coordinator shall conduct periodic status checks and take any necessary protective measures to ensure resident and staff safety.

Provision (e)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, pp. 10-11, Section 26, says in part, it is the duty of all staff to report to a next level supervisor or PREA Coordinator any knowledge or suspicion of retaliation towards a victim or a person who may have reported sexual abuse or harassment

Provision (f)

Auditors are not required to audit this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding agency protection against retaliation.

115.271	Criminal and administrative agency investigations
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	Auditor Overall Determination: Meets Standard
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Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Interviews with the following:

- Agency PREA Coordinator (APC)
- Investigative Staff

Through the interview process the investigative staff indicated investigations begin immediately following notification of the incident. The same protocols are used regardless of how the incident is reported, whether it is in person, telephonically, third party, by mail or anonymously.

Through the interview process the investigator confirmed that if a principle (victim or abuser) is released or terminated from the agency, it in no way alters the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved.

Through the interview process investigative staff confirmed special training is required to be an investigator. The Auditor reviewed the investigator's training records and verified attendance and participation in all mandated training.

Through the interview process, the investigative staff indicated that in administrative cases it is vital to gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

During the interview, investigative staff said when the evidence points to a crime being committed, the case is referred to the Beaumont Police Department for investigation. If the investigation uncovers evidence that a crime has been committed the case is forwarded to the District Attorney's Office for review for prosecution.

Through the interview process the investigative staff reported when it appears a crime may have been committed; all questions immediately stop. The perpetrator is immediately read Miranda rights and the case, including all evidence, is turned over to the Beaumont Police Department. At this point, the agency/facility investigative staff will only conduct compelled interviews after consultation with the Beaumont Police Department or the prosecutors, and a definite determination is made such interviews will not be an obstacle for subsequent criminal prosecution.

Through the interview process investigative staff reported in administrative investigations the evidence is followed as the investigation unfolds. In following the evidence, the investigative staff attempts to determine if staff actions or failure to act contributed to the allegation. All findings are summarized in an investigative report. Lastly, everything is documented in a written report, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

During the interview process, the APC confirmed criminal investigations are documented in a written report that contains thorough description of physical, testimonial and documentary evidence with copies of all documentary evidence attached where feasible.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 27, a-c, indicates (a) Land Manor, Inc. does not conduct any criminal investigations into allegations of sexual abuse and sexual harassment; however, it does complete an administrative investigation on all allegations of sexual abuse and sexual harassment.

Upon receiving an allegation of sexual harassment/abuse against a client from any individual, the Program Director/designee or PREA Coordinator shall immediately begin an in-house investigation, to include written statements, verbal statements, and any other data collected. A thorough Incident Report will be completed, and notification will be provided to the assigned TDCJ Contract Monitor within 1 hour, The allegation will also be reported to TDSHS within 24 hours. Any data collected will be forwarded to the Beaumont Police Department for a formal investigation.

(b) Staff shall make efforts to preserve physical data, interview alleged victims, suspected abuser, and witnesses. In-house investigations should include attempts to determine whether staff actions or failures to act contributed to the abuse; and will be documented in written reports that include possible physical evidence, witness statements, and all other potential evidence.

(c) Investigations will be conducted in their entirety, regardless of whether the alleged abuser or victim leaves the facility for any reason, and written reports will be maintained for 10 years. When outside agencies investigate sexual abuse, Land Manor, Inc. shall cooperate with outside investigators and shall attempt to remain informed about the progress of the investigation.

At the time of the audit, the facility had two in-house investigators. The Auditor reviewed documentation confirming the investigators completed specialized investigative training. The APC and PD complete all administrative investigations. If the evidence suggests a crime has been committed, the APC or PD will notify Beaumont Police Department. The APC or PD continues to work with the investigating agency to ensure an open and fluid investigation. All substantiated criminal cases are referred for prosecution.

In the past 12-months there have been zero allegations of sexual abuse and sexual harassment. Therefore, no documentation was reviewed.

Provision (b)

Facility investigators receive additional training including interviewing techniques for sexual abuse victims, conducting sexual abuse investigations in a confinement setting, investigation and evidence collection for resident sexual offenses, sexual harassment, and custodial sexual misconduct. This training is documented and was verified by the Auditor through employee signature on the training sheet.

Provision (c)

Investigations follow the same investigative format. It varies slightly if it is an alleged Sexual Harassment rather than an alleged Sexual Assault or Sexual Abuse. If it is an alleged Sexual Assault or Sexual Abuse incident, the investigator will go to the hospital or dedicated SAFE/SANE location where the victim is being seen, if appropriate.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 27 indicates in part that upon receiving an allegation of sexual harassment/abuse against a client from any individual, the Program Director/ designee or PREA Coordinator shall immediately begin an in-house investigation, to include written statements, verbal statements, and any other data collected. A thorough Incident Report will be completed, and notification will be provided to the assigned TDCJ Contract Monitor within 1 hour, The allegation will also be reported to TDSHS within 24 hours. Any data collected will be forwarded to the Beaumont Police Department for a formal investigation.

Provision (e)

The investigative staff reported credibility of anyone involved in the investigation is determined through the investigative process. Everyone is treated as credible and truthful unless the investigation proves otherwise. Polygraph is not used in the investigative process of PREA cases.

Provision (f)

As previously stated, during the past 12-months there have been zero allegations of sexual abuse or sexual harassment.

Provision (g)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 27 indicates in part where there is a belief that a criminal act may have taken place, the APC/Program Director directs the notification of law

enforcement for criminal investigation. The PREA Coordinator will be the point of contact with the investigating agency.

The agency/facility do not conduct criminal investigations. All criminal investigations are handled by the Beaumont Police Department.

When asked about handling criminal investigation, the investigative staff reported all steps are thoroughly documented, including investigative steps, interviews, facts, and findings, up until the point it is determined or suspected a criminal act occurred. At that point everything is handed over to the Beaumont Police Department to complete the investigation.

According to the PAQ, in the past 12 months there have been zero substantiated allegations of conduct that are criminal that were referred for prosecution.

Provision (h)

Per the PAQ, in the past 12 months there have been zero criminal cases referred for prosecution.

Provision (i)

During the interview process, the APC stated that the agency/facility retains all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Provision (j)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 27 (c) indicates Investigations will be conducted in their entirety, regardless of whether the alleged abuser or victim leaves the facility for any reason, and written reports will be maintained for 10 years. When outside agencies investigate sexual abuse, Land Manor, Inc. shall cooperate with outside investigators and shall attempt to remain informed about the progress of the investigation.

Provision (k)

Auditors are not required to audit this provision.

Provision (l)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 27 states in part, a criminal investigation shall be conducted by law enforcement officials. Facility staff shall cooperate with and assist with any request made by law enforcement. The PREA Coordinator shall endeavor to remain informed about the progress of the investigation.

Conclusions:

	Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets the standard regarding criminal and administrative agency investigations.
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115.272	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interview with the following:</p> <ul style="list-style-type: none"> • Investigative Staff <p>Through the interview process, investigative staff relayed that during an investigation, all available evidence is collected (from the victim, from the perpetrator, from the scene; interviews; etc.). Further the agency/facility imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 28(a) indicates Land Manor, Inc. shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding evidentiary standard for administrative investigations.</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Land Manor Coordinated Response Plan, undated.

Interview with the following:

- Agency PREA Coordinator (APC)
- Facility Head – Program Director (PD)
- Investigative Staff

During the interview process investigative staff indicated the last step of the investigation process takes place after all findings have been determined. At the conclusion of any PREA investigation the investigator sends to the Program Director/ designee or PREA Coordinator office a close out memorandum of the investigation and details of how the decision was made regarding the outcome. The facility is then responsible for notifying the resident of the outcome of the administrative investigation.

Through the interview process the APC confirmed following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/ facility informs the resident (unless the allegations are deemed unfounded, when:

- The employee/staff is no longer posted within the resident's unit.
- The employee/staff is no longer employed at the facility.
- The employee/staff has been indicted on a charge related to the sexual abuse within the facility.
- The employee/staff has been convicted on a charge related to sexual abuse within the facility.

Through the interview process the APC confirmed following a resident's allegation that he has been sexually abused by another resident, agency/facility will inform the victim whenever:

1. The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
2. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Through the interview process the PD confirmed all notifications or attempted notifications are documented in writing.

Provision (a)

According to the PAQ, there were zero criminal and/or administrative investigations of alleged resident sexual abuse completed by the agency/facility in the past 12 months. Therefore, there were zero notifications.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 11, Section 29(a) indicates following an investigation into a client's allegation of sexual abuse and sexual harassment, the Program Director/designee or PREA Coordinator shall inform the client as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Provision (b)

According to the PAQ, there were zero investigations of alleged resident sexual abuse in the facility that were completed by an outside agency in the past 12 months.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, states in part the ACP/PD shall ensure the relevant criminal information is received from the Beaumont Police Department to inform the resident.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 29(d) indicates following a client's allegation that another client has committed sexual abuse against a client, Land Manor, Inc. shall inform the alleged victim whenever:

1. Land Manor, Inc. learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility.
2. Land Manor, Inc. learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
3. All such notifications or attempted notifications are documented.

As previously stated in provision (a), upon completion of the investigation, the facility will also be responsible for notifying the resident(s) regarding the outcome of the investigation.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 29(d) indicates following a client's allegation that another client has committed sexual abuse against a client, Land Manor, Inc. shall inform the alleged victim whenever:

1. Land Manor, Inc. learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility.
2. Land Manor, Inc. learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
3. All such notifications or attempted notifications are documented.

Provision (e)

Land Manor Coordinated Response Plan, undated, p. 7, G, Follow-Up/Long-Term Duties, Executive Director, 1-11, outlines the responsibilities of the Executive Director to include the following:

1. Complete a written report of the administrative investigation that includes a description of the physical and testimonial evidence, the reasoning behind any credibility assessments, and investigative facts and findings
2. Cooperate with the investigating law enforcement agency on the criminal investigation.
3. Confer with the investigating law enforcement agency prior to conducting compelled interviews with staff or administering Garrity warnings. Any interviews with staff members for an internal investigation should be coordinated with the investigating law enforcement agency to ensure that statements collected will not become inadmissible in the criminal case.
4. If any credibility assessments are conducted, document the reasoning behind them.
5. Assess whether staff actions or failures contributed to the incident.
6. In cases of alleged staff sexual abuse, notify the victim whenever the staff member is no longer posted within the facility, or the staff member is no longer employed at the facility. Document the notifications or attempted notifications.
7. Conduct Sexual Assault Incident Review meetings with SART members within 30 days of the conclusion of the investigation for all substantiated and unsubstantiated incidents.
8. Consider the following factors during the Sexual Abuse Incident Review team meeting: whether the allegation or investigation indicates a need to make changes in policy or practice; whether staff actions or failures contributed to the sexual abuse; whether the incident or allegation was motivated by group or individual identity or dynamics; the area in the facility where the abuse occurred to assess whether physical barriers in the area may enable abuse; and the adequacy of staffing levels and video technology.
9. Prepare a report of the Sexual Abuse Incident Review team's findings and any recommendations for improvement.
10. Approve and implement any corrective action plans based upon the Sexual Assault Incident Review.
11. Convene and attend regular meetings of the SART.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual

	<p>Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, states in part the requirement to provide resident notification shall terminate if the resident is released from the program.</p> <p>Land Manor Coordinated Response Plan, undated, p. 7, G, Follow-Up/Long-Term Duties, Executive Director, Number 6, indicates in cases of alleged staff sexual abuse, notify the victim whenever the staff member is no longer posted within the facility, or the staff member is no longer employed at the facility. Document the notifications or attempted notifications.</p> <p>Provision (f)</p> <p>The Auditor is not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding reporting to residents.</p>
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115.276	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • 448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>During the interview process, the APC confirmed 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, are reported to law enforcement agencies, (unless the activity was clearly not criminal. It is also reported to any relevant licensing body.</p> <p>During the interview process the APC confirmed all staff are subject to disciplinary sanctions up to and including termination for violating agency/facility sexual abuse</p>

or sexual harassment policies.

During the interview process the APC confirmed termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

During the interview process, the APC confirmed disciplinary sanctions for violations of agency/facility policies relating to sexual abuse and sexual harassment (other than engaging in sexual abuse) is commensurate with the nature and circumstances of the act committed, the staff members disciplinary history and the sanctions imposed for comparable offense by other staff with similar histories.

During the interview process, the APC confirmed 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, are reported to law enforcement agencies, (unless the activity was clearly not criminal. It is also reported to any relevant licensing body.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 30 indicates:

- Staff will be terminated immediately upon facility identifying evidence that he/she has violated Land Manor, Inc. sexual abuse/ harassment policies.
- All terminations for violations of Land Manor, Inc. sexual abuse and sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the Beaumont Police Department, unless the activity was clearly not criminal, and TDCJ and TDSHS.

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, p. 6, DISCIPLINARY SANCTIONS FOR STAFF, Sections A-B, DISCIPLINARY SANCTIONS FOR STAFF indicates:

A. Staff will be terminated immediately upon facility identifying evidence that he/she has violated Land Manor, Inc. sexual abuse/ harassment policies.

B. All terminations for violations of Land Manor, Inc. sexual abuse and sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the Beaumont Police Department, unless the activity was clearly not criminal, and TDCJ and TDSHS.

Provision (b)

See provision (a) policy details.

Provision (c)

	<p>See provision (a) policy details.</p> <p>Provision (d)</p> <p>See provision (a) policy details.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding disciplinary sanctions for staff.</p>
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115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • 448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>During the interview process, the APC verified the policy of agency/facility regarding corrective actions for contractors and volunteers.</p> <p>Provision (a)</p> <p>448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, pp. 6-7, DISCIPLINARY SANCTIONS FOR CONTRACTORS and VOLUNTEERS, Section A, indicates any contractor/ volunteer who engages in sexual abuse shall be prohibited from contact with clients and shall be reported to the Beaumont Police Department, unless the activity was clearly not criminal, and TDCJ and TDSHS. If the act was determined to be criminal, the contractor/volunteer will not be allowed to enter Land Manor, Inc. premises again.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/</p>

	<p>2020, p. 12, Section 31(a) indicates any contractor/ volunteer who engages in sexual abuse shall be prohibited from contact with clients and shall be reported to the Beaumont Police Department, unless the activity was clearly not criminal, and TDCJ and TDSHS. If the act was determined to be criminal, the contractor/volunteer will not be allowed to enter Land Manor, Inc. premises again.</p> <p>According to the PAQ, there were zero PREA investigations involving contractors or volunteers in the past 12 months.</p> <p>Provision (b)</p> <p>See Provision (a) for policy details.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding corrective action for contractors and volunteers.</p>
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115.278	Disciplinary sanctions for residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • 448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020 <p>Interview with the following</p> <p>Agency PREA Coordinator (APC)</p> <p>During the interview process, the APC confirmed the following:</p> <ul style="list-style-type: none"> • all residents are subject to disciplinary sanctions following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse. • all residents’ disciplinary sanctions are commensurate with the nature and circumstances of the abuse committed, the resident’s disciplinary history, and the sanctions imposed for comparable offense by other residents with similar histories.

- a resident's mental disability or mental illness, if any, is considered to establish if it is a contributing factor when determining what type of sanction should be imposed.
- a resident will be referred for counseling, therapy, or other intervention if it is deemed the resident could benefit from such a referral as it relates to sexual abuse.
- a resident is only disciplined for sexual contact with staff if the staff member did not consent to sexual contact.
- for the purpose of disciplinary action, a report of sexual abuse will be considered made in good faith, based upon a reasonable belief that the alleged conduct occurred, even if the investigation does not establish enough evidence to substantiate the allegation.

Provision (a)

The PAQ reflects in the past twelve months there was zero administrative findings of resident-on-resident sexual abuse at the facility. The PAQ also reflects in the past twelve months there has been zero criminal findings of resident-on-resident sexual abuse at the facility.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(a) indicates clients shall be subject to disciplinary sanctions following an administrative finding that the client engaged in client-on-client sexual abuse or following a criminal finding of guilt for client-on-client sexual abuse. Sanctions shall be determined through a Treatment Team Meeting with the client's supervision officer (Parole Officer/CSO), barring any legal action which may be taken by law enforcement.

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, p. 7, Section A, indicates clients shall be subject to disciplinary sanctions following an administrative finding that the client engaged in client-on-client sexual abuse or following a criminal finding of guilt for client-on-client sexual abuse. Sanctions shall be determined through a Treatment Team Meeting with the client's supervision officer (Parole Officer/CSO), barring any legal action which may be taken by law enforcement.

Provision (b)

448.601 (Q) Land Manor, Inc, Policy, and Procedures, 115.211 Zero-Tolerance of Sexual Abuse & Sexual Harassment, revised 04/2020, p. 7 indicates sanctions shall be appropriate to the nature of abuse committed, the offender's disciplinary history, and the sanction imposed for comparable offenses by other offenders with similar histories.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual

Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(b) indicates the disciplinary process shall consider whether a client's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be enforced. Land Manor, Inc. shall not deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

Provision (d)

The PAQ indicates the facility does offer therapeutic services and interventions to residents.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(c) indicates Land Manor, Inc. shall consider whether to require the offending client to participate in therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse as a condition of access to programming or other benefits.

Provision (e)

The PAQ reflects the facility only disciplines residents for sexual contact with staff when it is determined the staff member did not consent.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(d) indicates Land Manor, Inc. may discipline a client for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Provision (f)

The PAQ reflects the facility prohibits disciplinary action for a report of sexual abuse made in good faith.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(e) indicates for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Provision (g)

The PAQ indicates the facility prohibits all sexual activity between residents. Further, it states it only considers sexual activity between residents to be sexual abuse if it is coerced.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual

	<p>Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 12, Section 32(f) indicates Land Manor, Inc. prohibits all sexual activity between clients and may discipline clients for such activity. Land Manor, Inc. may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for residents.</p>
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115.282	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interview with the following</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>Through the interview process, the APC verified the nature and scope of emergency medical treatment and crisis intervention services are determined by medical and mental health practitioners according to their professional judgment.</p> <p>Through the interview process, the APC confirmed that staff first responders take preliminary steps to protect the victim and immediately notify the PD or duty officer, who immediately notifies the appropriate medical and mental health practitioners.</p> <p>During the interview process, the APC verified resident victims of sexual abuse are offered timely access to emergency contraception (female) and sexually transmitted infections prophylaxis (male and female).</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 33, a, indicates client victims of sexual abuse shall receive immediate, unimpeded access to emergency medical treatment and crisis</p>

	<p>intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.</p> <p>Provision (b)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 33, b, indicates staff first responders shall take preliminary steps to protect the victim pursuant to 115.262 and shall immediately notify their supervisor for transport to appropriate medical and mental health practitioners.</p> <p>Provision (c)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020., Section 33m cm indicates client victims of sexual abuse shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate through Child Abuse & Forensic Services, Inc. and Rape & Suicide Crisis Center of Southeast Texas. This will be accomplished through immediate referral and consent from the client.</p> <p>Provision (d)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 33, d, indicates treatment services shall be 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.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding access to emergency medical and mental health services.</p>
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115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and

Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

- Memorandum Agreement between Land Manor and The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022

Interview with the following:

- Facility Head - Program Director (PD)

During the interview process, the PD confirmed the agency/facility does not offer medical and mental health services on site but does provide those services to the residents in the community.

During the interview process, PD explained that treatment plans, follow-up treatment, and referrals for continued care are made as appropriate for each individual resident.

During the interview process with PD confirmed all medical and mental health services are conducted in the community and therefore are consistent with the community level of care.

During the interview process, the PD indicated all treatment services are provided to alleged victims without financial cost, regardless of whether the victim names the abuser or cooperated with any investigation arising out of the incident.

Provision (a)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 33(a) indicated the facility shall offer access to medical and mental health evaluation and, as appropriate, treatment to all clients who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility through referral/client consent and transportation to a Child Abuse & Forensic Services, Inc., Rape and Suicide Crisis Center, Spindletop MHMR or other local service agency qualified to provide such services.

The Auditor reviewed a copy of Memorandum Agreement between Land Manor and The Rape and Suicide Crisis Center of Southeast Texas, dated December 7, 2022. This agreement is for the purpose of facilitating services related to implementation of Prison Rape Elimination Act (PREA). The Crisis Center is a community service provider who is being contracted to provide confidential emotional support services related to sexual abuse to residents within the facility.

The Auditor reviewed records, produced by the facility, documenting the community standard of care, the evidence of sexually transmitted Infection testing, prophylaxis treatment, psychiatry and psychology services, crisis intervention. These services are free of charge to residents regardless of whether the abuser is named or whether the resident cooperates with an investigation.

Provision (b)

As stated in provision (a) the evaluation and treatment of such victims shall include as appropriate, follow-up services, and, when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody

Documentation and records reviewed supported attentiveness to follow-up services and treatment plans. The files demonstrated detailed and professional notes on the evaluations conducted by medical and mental health staff and their follow-up appointments with residents. Follow-up consisted of routine resident visits with community medical and mental health staff.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, specifies offender victims shall be provided medical and mental health services consistent with the community level of care.

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, says in part residents who have the capacity to become pregnant because of sexually abusive penile-vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct described in this section, the victim shall receive timely and comprehensive information about and access to all lawful pregnancy-related medical services in accordance with CMHC policies.

Provision (e)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 13, Section 34(c) indicates client victims of sexually abusive vaginal penetration shall be offered a pregnancy test, as well as pregnancy-related medical services through the Hope Center or other local resource agency.

Provision (f)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 13, Section 34(b) indicates client victims of sexual abuse while a resident shall be offered tests for sexually transmitted infections as medically appropriate.

Provision (g)

According to the PAQ, resident victims of sexual abuse are offered tests for sexually transmitted infections as medically appropriate while incarcerated offered.

Provision (h)

	<p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 14 Section 34(e), indicates Land Manor, Inc. shall attempt to conduct a mental health evaluation of all known client-on-client abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims.</p>
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115.286	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. <p>Interview with the following:</p> <ul style="list-style-type: none"> • Facility Head – Program Director (PD) • Incident Review Team (IRT) <p>During the interview process the PD confirmed the composition of the review team and the facility commitment to consider and incorporated recommendations from team members.</p> <p>During the interview process an Incident Review Team Member confirmed the make-up of the Incident Review Team is consistent with the requirements of this standard.</p> <p>During the interview process an Incident Review Team Member reported that the team considers all criteria listed above, as required by PREA policy. The report from the Sexual Abuse Incident Review team is submitted to the Warden and the USPPM.</p> <p>Provision (a)</p> <p>The PAQ reflects that in the past 12-months there have been zero criminal and/or administrative investigations of alleged sexual abuse completed at the facility.</p>

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 14, Section 35, indicates the following:

(a) Land Manor, Inc. shall 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. The review shall occur within 30 days of the conclusion of the investigation. The review team shall consist of upper-level management officials - the Program Director, PREA Coordinator, and Executive Director and allow for input from facility staff, investigators, and medical or mental health practitioners, as applicable.

(b) The review team shall:

1. determine if policies need modification to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; sexual orientation; gang affiliation; or was motivated/caused by other group dynamics at the facility.
2. examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
3. assess the adequacy of staffing levels in that area during different shifts.
4. assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
5. prepare a thorough, complete report of its findings/recommendation for improvement, and submit such report to the designated TDCJ Contract Monitor and TDSHS.

(c) Land Manor, Inc. shall implement the recommendations for improvement or shall document its reasons for not doing so.

Provision (b)

The PAQ reflects that in the past 12-months there have been zero criminal and/or administrative sexual abuse incident reviews completed at the facility.

As stated in Provision (a) the sexual abuse incident review is conducted within 30 days of the conclusions of all sexual abuse investigations including allegations that are found to be unsubstantiated.

Provision (c)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 14, Section 35(a) indicates Land Manor, Inc. shall 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. The review shall occur within 30 days of the

	<p>conclusion of the investigation. The review team shall consist of upper-level management officials - the Program Director, PREA Coordinator, and Executive Director and allow for input from facility staff, investigators, and medical or mental health practitioners, as applicable.</p> <p>Provision (d)</p> <p>According to the PAQ the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Coordinator.</p> <p>Provision (e)</p> <p>According to the PAQ the facility implements recommendations for improvement or documents its reasons for not doing so.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding sexual abuse incident reviews.</p>
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115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 • Annual PREA Reports <p>Interview with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>Through the interview process the APC confirmed the incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice</p> <p>Through the interview process the APC confirmed the facility maintains, reviews,</p>

and collects data as needed from all available incident-based documents including reports, investigation files, and sexual abuse incident reviews.

Through the interview process the APC confirmed she obtains and includes incident-based and aggregated data from every facility with which CSI contracts for the confinement of its residents.

During the interview process with the APC, she confirmed agency/facility would provide any requested data from the previous calendar year to the Department of Justice no later than June 30, if requested.

Provision (a)

According to the PAQ, the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, Section 36, a-d, indicates the following:

(a) Land Manor, Inc. shall collect accurate, uniform data for every allegation of sexual abuse at its facilities under its direct control using a standardized instrument and set of definitions.

(b) Land Manor, Inc. shall aggregate the incident-based sexual abuse data at least annually. The data collected shall include, at a minimum, the data necessary to answer all the questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

(c) Land Manor, Inc. shall maintain, review, and collect data as needed from all available incident-based documents including reports, investigation files, and sexual abuse incident reviews. Land Manor, Inc. shall use data collected from the facility.

(d) Upon request, Land Manor, Inc. shall provide all such data from the previous calendar year to the requesting Texas Department of Criminal Justice staff/division.

A review of the previous annual PREA reports confirms this provision has been met.

Provision (b)

See Provision (a) for policy and procedure details.

A review of the previous annual PREA reports confirms this provision has been met.

Provision (c)

See Provision (a) for policy and procedure details.

Provision (d)

See Provision (a) for policy and procedure details.

	<p>Provision (e)</p> <p>See Provision (a) for policy and procedure details.</p> <p>Provision (f)</p> <p>See Provision (a) for policy and procedure details.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding data collection.</p>
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115.288	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020. • Annual PREA Reports • Agency website www.landmanor.org/PREA <p>Interview with the following:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>Through the interview process the APC confirmed the agency CEO approves the annual report.</p> <p>Provision (a)</p> <p>According to the PAQ, the agency reviews data collected and aggregated pursuant to §115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies.</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 15, Section 37, (a-d) indicates</p> <p>(a) Land Manor, Inc. shall review collected data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including:</p>

1. Identifying problem areas.
2. Taking corrective action on an ongoing basis; and
3. Preparing an annual report of its findings and corrective actions for the facility, as well as Land Manor, Inc..

(b) Such a report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of Land Manor, Inc.'s progress in addressing sexual abuse.

(c) Land Manor, Inc.'s report shall be approved by Land Manor, Inc. Executive Director and made readily available to the public when requested.

(d) Land Manor, Inc. may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

Provision (b)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 15, Section 37, (b) indicates such a report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of Land Manor, Inc.'s progress in addressing sexual abuse.

A review of the previous annual PREA reports confirms this provision has been met.

Provision (c)

According to the PAQ the agency makes its annual report readily available to the public at least annually through its website www.landmanor.org/PREA

Provision (d)

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates the annual report shall be made available to the public through its website. Should the agency/facility feel it necessary to redact information from the annual report prior to publication, redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The nature of which would be documented.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding data review for corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.
- Agency/facility website www.landmanor.org/PREA

Interview with the following:

- Agency PREA Coordinator (APC)

During the interview process with the APC, the Auditor learned the agency/facility securely retains data. The data is retained within a secure system and access to the system is limited to those staff with a need-to-know. Additional data is retained at the Agency level as required for completion of the SSV-2, and within the agency website for public access.

During the interview process, the APC confirmed the agency makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts readily available to the public annually on the PREA section of their website.

Provision (a)

According to the PAQ, the agency ensures that incident-based and aggregate data is securely retained.

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 15, section 38, a-b, indicates:

(a) Land Manor, Inc. shall ensure that collected data are securely locked and retained for a period of 10 years and shall make all sexual abuse data readily available to the public at least annually through requests for the information.

Before making such sexual abuse data publicly available, Land Manor, Inc. shall remove all personal identifiers.

(b) Posters with information on how to request data will be posted in common area of the facility

Provision (b)

The Agency PREA webpage provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards.

	<p>Data can be accessed at: www.landmanor.org/PREA</p> <p>Provision (c)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates in part, that prior to making the data public, all personal identifiers shall be redacted. This data, minus redactions, shall also be provided to the CT DOC for inclusion in their annual report.</p> <p>Provision (d)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, indicates in part that records will be maintained for at least 10 years after the date of initial collection.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding data storage, publication, and destruction.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020 • Agency website www.landmanor.org/PREA <p>Interview with the following</p> <ul style="list-style-type: none"> • Agency PREA Coordinator (APC) <p>During an interview with the APC, the Auditor learned the audit is in the first year of the new three-year audit cycle.</p> <p>Provision (a)</p> <p>448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual</p>

Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p. 15, Section 38, a-b, indicates:

(a) Land Manor, Inc. shall ensure that the facility is audited annually. Audits are to be conducted by the PREA Coordinator (Quality Management Coordinator), and/or Executive Director.

(b) The auditor shall conduct an observation session of all areas of the audited facilities and interview a randomly-selected sample of clients and staff regarding PREA compliance policies/procedures to ensure that said policies/procedures are being followed and staff are knowledgeable of such. All client-provided information is to be kept confidential, subject only to review/access by the following individuals: PREA Coordinator (Quality Management Coordinators) Executive Director, TDCJ personnel, and TDSHS personnel.

The APC reported each facility within the agency had been audited within the previous three year audit cycle. Copies of all audit reports are on the agency website for public information and review.

The agency webpage provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: www.landmanor.org/PREA

Provision (b)

During an interview with the APC, the Auditor learned the audit is in the first year of the new three-year audit cycle. The Agency webpage provides the most recent report relative to sexual abuse data from the various facilities in accordance with PREA standards.

Provision (c)

N/A

Provision (d)

N/A

Provision (e)

N/A

Provision (f)

N/A

Provision (g)

N/A

Provision (h)

	<p>During the on-site portion of the audit, the Auditor had complete, unimpeded access to every area of the facility. Throughout the on-site portion of the audit the APC, PD and other staff were available to accompany the auditor and give her complete access to any part of the facility she requested to see.</p> <p>Provision (i)</p> <p>At all times throughout the audit process, the agency/facility provided the Auditor with all requested information in a timely and complete manner.</p> <p>Provision (j)</p> <p>N/A</p> <p>Provision (k)</p> <p>N/A</p> <p>Provision (l)</p> <p>N/A</p> <p>Provision (m)</p> <p>The Auditor was provided a private space to conduct all interviews during the on-site portion of the audit.</p> <p>Provision (n)</p> <p>During resident interviews, all residents reported they were provided the opportunity to send out confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Provision (o)</p> <p>N/A</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding frequency and scope of audits.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- 448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020.

Provision (f)

The agency webpage provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: www.landmanor.org/PREA

448.601(QQ), Land Manor, Inc, Policy and Procedures, Sexual Abuse and Sexual Harassment, Corresponding to the Prison Rape Elimination Act (PREA), revised 04/2020, p.16, Section 39, a-b, indicates:

(a) Land Manor, Inc. PREA Coordinator (Quality Management Coordinator) and/or Executive Director shall develop a corrective action plan to achieve compliance with any findings of non-compliance during an audit by TDCJ or DOJ.

(b) Land Manor, Inc. shall ensure implementation of the corrective action plan, such as reviewing updated policies and procedures or re-inspecting portions of a facility.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding audit contents and findings.

Appendix: Provision Findings		
115.211 (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
115.211 (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 community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	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 residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (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 residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	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
115.213 (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? (NA if no deviations from staffing plan.)	yes
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.215 (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 residents?	yes
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical 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 have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical 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?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents 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: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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 residents 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 residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents 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 residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents 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 residents 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
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, the performance of first-response duties under §115.264, or the investigation of the resident’s allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents 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 the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (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 residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, 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
115.217 (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 residents?	yes
115.217 (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 residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217	Hiring and promotion decisions	

(f)		
	Does the agency ask all applicants and employees who may have contact with residents 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 residents 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
115.217 (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
115.217 (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
115.218 (a)	Upgrades to facilities and technology	
	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 residents 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
115.218 (b)	Upgrades to facilities and technology	
	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	na

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (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
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA 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/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (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
115.221 (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?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (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
115.221 (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.)	yes
115.221 (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 attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	na

115.222 (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
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy 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
115.222 (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 conducting criminal investigations. See 115.221(a).)	yes
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents 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 residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	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,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents 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 residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	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 criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (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.)	na

	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.)	na
	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.)	na
	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.)	na
115.235 (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 does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (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.)	na
115.235 (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 §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	na
	Do medical and mental health care practitioners contracted by	na

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents 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
115.241 (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 resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

(f)		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	

	Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (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 resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident 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.	no
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents 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 a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident 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
115.252 (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 residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident 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 resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

	of a resident, 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.)	
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident 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 a resident 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 resident 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
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to	yes

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents 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 enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, 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
115.253 (c)	Resident 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 residents 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
115.254 (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 a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	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 residents 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
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do 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
115.261 (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 residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (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
115.261 (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

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident 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
115.263 (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
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (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
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident 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 a resident 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 a resident 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,	yes

	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?	
	Upon learning of an allegation that a resident 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, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (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
115.265 (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
115.266 (a)	Preservation of ability to protect residents 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 limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 resident 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:4. Monitor resident 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 resident 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 reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (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
115.271 (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 115.221(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 115.221(a).)	yes
115.271 (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 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	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
115.271 (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
115.271 (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 resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (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
115.271 (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
115.271	Criminal and administrative agency investigations	

(h)		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (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 facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (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 any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (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
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	yes

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.273 (c)	Reporting to residents	
	Following a resident’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 posted within the resident’s unit?	yes
	Following a resident’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 a resident’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 a resident’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 convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident’s allegation that he or she has been sexually abused by another resident, 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 a resident’s allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (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
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (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
115.276 (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 enforcement agencies, unless the activity was clearly not criminal?	yes
	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
115.277 (a)	Corrective action for contractors and volunteers	

	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	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
115.277 (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 residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	yes

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	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
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident 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
115.282 (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 § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (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
115.283 (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 residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (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
115.283 (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
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident 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 residents 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.)	yes
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	yes

	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 residents 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.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (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
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (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
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (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

115.286 (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
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	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 should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (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
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	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
115.287 (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
115.287 (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 residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (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
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 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 § 115.287 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 § 115.287 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

115.288 (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
115.288 (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
115.288 (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
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (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
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 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
115.401 (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 residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
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