

PREA Facility Audit Report: Final

Name of Facility: LeBlanc Unit

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/11/2023

| 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: 10/11/ 2023 |

| AUDITOR INFORMATION | |
|-------------------------------------|------------------------|
| Auditor name: | O'Connor, Darla |
| Email: | darla@preaauditing.com |
| Start Date of On-Site Audit: | 08/22/2023 |
| End Date of On-Site Audit: | 08/24/2023 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | LeBlanc Unit |
| Facility physical address: | 3695 Farm to Market Road 3514, Beaumont, Texas - 77705 |
| Facility mailing address: | |

| Primary Contact | |
|--------------------------|------------------------------|
| Name: | Brenda German |
| Email Address: | Brenda.German@tdcj.texas.gov |
| Telephone Number: | 9364373439 |

| Warden/Jail Administrator/Sheriff/Director | |
|---|--------------------------------|
| Name: | Bruce Frederick |
| Email Address: | Bruce.Frederick@tdcj.texas.gov |
| Telephone Number: | 409-724-1515 |

| Facility PREA Compliance Manager | |
|---|------------------------------------|
| Name: | Tiffinie McCullough |
| Email Address: | tiffinie.mccullough@tdcj.texas.gov |
| Telephone Number: | O: 409-724-1515 |

| Facility Health Service Administrator On-site | |
|--|-------------------|
| Name: | Jacquelyn Womack |
| Email Address: | JaWomack@utmb.edu |
| Telephone Number: | 409-724-1515 |

| Facility Characteristics | |
|--|------|
| Designed facility capacity: | 1224 |
| Current population of facility: | 1185 |
| Average daily population for the past 12 months: | 1141 |
| Has the facility been over capacity at any point in the past 12 months? | No |

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| Which population(s) does the facility hold? | Males |
| Age range of population: | 18-84 |
| Facility security levels/inmate custody levels: | G1, G2 |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 285 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 27 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 6 |

AGENCY INFORMATION

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

Agency Chief Executive Officer Information:

| | |
|--------------------------|------------------------------|
| Name: | Bryan Collier |
| Email Address: | bryan.collier@tdcj.texas.gov |
| Telephone Number: | 936-437-2101 |

Agency-Wide PREA Coordinator Information

| | | | |
|--------------|--------------------|-----------------------|-----------------------------------|
| Name: | Cassandra McGilbra | Email Address: | cassandra.mcgilbra@tdcj.texas.gov |
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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:

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| 4 | <ul style="list-style-type: none"> • 115.31 - Employee training • 115.33 - Inmate education • 115.51 - Inmate reporting • 115.65 - Coordinated response |
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Number of standards met:

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| 37 |
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Number of standards not met:

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| 0 | |
| <p>Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.</p> | 4 |

AGENCY AUDIT FINDINGS

Summary of Audit Findings

These standards were audited at the agency-level. For more information, please see the

attached agency audit report found at the end of this document.

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

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

Number of standards exceeded:

1

- 115.12 - Contracting with other entities for the confinement of inmates

Number of standards met:

7

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

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| 1. Start date of the onsite portion of the audit: | 2023-08-22 |
| 2. End date of the onsite portion of the audit: | 2023-08-24 |

Outreach

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| 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 |

AUDITED FACILITY INFORMATION

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| 14. Designated facility capacity: | 1224 |
| 15. Average daily population for the past 12 months: | 1141 |
| 16. Number of inmate/resident/detainee housing units: | 19 |
| 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

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| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit: | 1151 |
| 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: | 31 |
| 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: | 16 |
| 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: | 6 |
| 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: | 9 |
| 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: | 32 |
| 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: | 58 |

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| <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>3</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>41</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 inmates inmates/residents/detainees 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 inmates, as well as a complete alphabetical inmate 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>285</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>6</p> |

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| <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>27</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 PAQ reflects 6 volunteers approved to enter the facility and have contact with inmates. These volunteers are provided specific PREA training as it relates to volunteers, in addition to the TDCJ specific PREA training. One volunteer was interviewed.</p> <p>The PAQ reflects 27 contractors approved to enter the facility and have contact with inmates. These contractors are provided specific PREA training as it relates to volunteers, in addition to the TDCJ specific PREA training. One contractor was interviewed.</p> <p>All in-person interviews occurred in a private space.</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>20</p> |

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| <p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p> | <p><input checked="" 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> |
| <p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p> | <p>The institutional count the first day of the on-site audit was 1151. According to the Auditor Handbook this requires a minimum of 20 inmates to be interviewed.</p> <p>The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates from varying housing units to interview, ensuring diversity in age and race.</p> |
| <p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p> | <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 1151. According to the Auditor Handbook with a population of 1151, the auditor shall interview a minimum of 20 random inmates and 20 targeted inmates. Twenty random inmates were interviewed. These were inmates that were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age, race, and length of sentence.

During the on-site tour, the Auditor had several conversational encounters with inmates 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 one letter from an inmate. The author of the letter was interviewed.

At the beginning of each interview the Auditor made clear to the inmate 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 inmate's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willingly participated in the interview process. All responses were hand typed.

During the random interviews, no PREA issues were revealed and no other interview protocols were needed or used. All random inmates 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 | |
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| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed: | 21 |
| <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: | 9 |
| 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: | 2 |
| 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: | 2 |
| 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: | 3 |

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| <p>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:</p> | <p>1</p> |
| <p>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:</p> | <p>2</p> |
| <p>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:</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>The facility reported their were zero transgender or intersex inmates assigned to the facility during the on-site audit. During the facility tour the auditor did not observe any inmates who appeared to be transgender. The medical and mental health staff reported there were no transgender inmates assigned to the facility.</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>1</p> |

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| <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>The facility reported there were zero inmates who had been placed in segregation for risk of sexual victimization. The staff working segregation confirmed there were zero inmates in segregation for risk of sexual victimization.</p> |

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| <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 inmates who fell into the targeted categories. The Auditor chose inmates from the list of targeted inmates provided by the facility staff. Once selected, each inmate was put on “call- out” with a time to report to the private space designated for interviews.</p> <p>Breakdown of Targeted Inmate Interviews</p> <ul style="list-style-type: none"> Transgender or Intersex - 0 Gay or Bisexual - 2 Physically Disabled - 9 Cognitively Disabled - 2 Hearing Impaired - 3 Visually Impaired - 2 LEP - 1 Reported Abuse - 1 Disclosed Abuse in Screening - 1 <p>Inmates in Segregated Housing for PREA - 0</p> <p>Youthful Inmates - 0</p> <p>The information the Auditor gained from the facility tour, informal conversations with inmates and staff, as well as formal interviews with staff and inmates supported this assertion. At the beginning of each interview the Auditor made clear to the inmate 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 inmate’s participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked the inmate 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.</p> <p>Regarding personal safety, all inmates interviewed reported they felt safe from sexual harassment and sexual abuse.</p> |
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

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| <p>71. Enter the total number of RANDOM STAFF who were interviewed:</p> | <p>20</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 type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input 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> |
| <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):</p> | <p>The facility provided a staff roster and work schedule for the days of the on-site audit. Staff were chosen from the staff who were available the days of the on-site audit. 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 twenty formal random staff interviews were conducted.</p> |
| <p>Specialized Staff, Volunteers, and Contractor Interviews</p> | |
| <p>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.</p> | |
| <p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p> | <p>23</p> |
| <p>76. Were you able to interview the Agency Head?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |

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| 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

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| | <input checked="" type="checkbox"/> Other |
| If "Other," provide additional specialized staff roles interviewed: | Classification Staff Mailroom Staff |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of VOLUNTEERS who were interviewed: | 1 |
| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other |
| 82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of CONTRACTORS who were interviewed: | 1 |
| b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other |

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| <p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p> | <p>Using the list of specialized staff provided, the Auditor was able to select individuals for interviews. All specialized staff provided answers were based on the line of questioning on the specific interview protocols for their position and responsibilities.</p> <p>During interviews with specialized staff, the Auditor learned PREA investigations can be initiated in several ways: “confidential” letters can be mailed out of the facility, contacting the Office of Inspector General, calls to the PREA Ombudsman, written notes given to trusted staff, verbal reports, or through third party reporting. Additionally, any inmate 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 Unit Safe Prison PREA Manager and is documented and addressed according to PREA Standards.</p> |
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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.

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| <p>84. Did you have access to all areas of the facility?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
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Was the site review an active, inquiring process that included the following:

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| <p>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)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p>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)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p>88. Informal conversations with staff during the site review (encouraged, not required)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |

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).

Richard P. LeBlanc Unit is a G1, G2 security level facility located at 3695 FM 3514 Beaumont, TX 77705. The facility houses male offenders. The facility was opened in 1995 and has a capacity of 1,224 inmates. LeBlanc Unit has nineteen housing units. Eighteen open bay dormitory housing units and one segregation unit with cells. The cells have a toilet and sink inside the cell. The shower is outside the cell and is a single stall shower the inmates are escorted to by correctional officers. The open bay dormitories have bathrooms that are inside the dormitories. The shower is a communal shower with a curtain along the large opening. The toilets have partitions, and the sinks are along one wall.

The facility has an inmate food service area with kitchen, dining room, steward office, inmate restroom, staff restroom, dish room, freezer, refrigeration, cooking area, and serving line. The facility also has a medical services unit, mental health services unit and administrative offices. Other areas of the facility which were toured were the chapel, laundry, classrooms and programming areas, barber shop, law library, leisure library, shift office, visitation, commissary, strip search area, recreational areas, back gate, receiving and discharge and housing units.

During the facility tour, the Auditor observed appropriate PREA signage, including the Pre-Audit Notice. Additionally, during the facility tour the Auditor looked for appropriate facility lay-out, bathroom privacy, blind spots, placement of cameras, security mirrors, custodial staff to inmate ratio in housing units and on work assignments.

The facility has camera coverage which was made more robust by security mirrors enhancing inmate supervision.

The Auditor was given unimpeded and complete access to all areas of the facility.

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 285 facility staff. There was a total of fifty record reviews conducted on staff from various categories. The records were selected by randomly choosing names from the master staff roster.

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.

Inmate Records:

There were fifty inmate records reviewed, chosen randomly from the master roster. All records had a signed acknowledgment sheet, had received PREA information and viewed the PREA video. All inmates 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, they were reassessed within thirty days of their initial 72-hour assessment.

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, the facility reported 19 allegations of sexual abuse and sexual harassment allegations in the past twelve months. All PREA investigative files were reviewed.

The Auditor was provided the PREA files for every allegation.

The files were reviewed using the PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case# / ID
- Date of Allegation
- Date of Investigation
- Staff-or-Inmate-on-Inmate
- Sexual Abuse or Sexual Harassment Final Disposition
- Is Disposition Justified?
- Investigating Officers
- Notice Given to Inmate

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 eleven allegations reported. Eight were inmate-on-inmate sexual abuse allegations. All eight were investigated administratively and one was deemed to be unfounded and the remaining seven were deemed to be unsubstantiated. Four of those eight were referred for criminal review and investigation. Of the four referred for review and investigation, one was referred for prosecution and three were still under investigation at the time of the on-site audit. The remaining three sexual abuse allegations were staff-on-inmate allegations. All three were investigated administratively and deemed to be unsubstantiated. Zero were referred for criminal review and investigation. At the time of the audit, information received regarding the allegations of sexual harassment during the past twelve months revealed a total of eight sexual harassment allegations reported. All allegations were inmate-on-inmate. They were investigated administratively and deemed to be unsubstantiated.

The Auditor reviewed eleven files of sexual abuse allegations and eight files of sexual harassment allegation.

In all sexual abuse cases the alleged victim was offered medical and mental health services. One was referred for a SANE examination and was provided an OVR staff member as a victim advocate. All sexual abuse cases, except the one that was “unfounded” had a sexual abuse incident team review within 30-days of the completion of the investigation. Sexual harassment cases do not require a sexual abuse incident team review. All nineteen inmates were notified in writing of the results of the investigation in a timely manner.

The institution staff I encountered were pleasant. Their attitudes toward PREA were open and interested in the success of the

program.

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 | 8 | 4 | 8 | 4 |
| Staff-on-inmate sexual abuse | 3 | 0 | 3 | 0 |
| Total | 11 | 4 | 11 | 4 |

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 | 8 | 0 | 8 | 0 |
| Staff-on-inmate sexual harassment | 0 | 0 | 0 | 0 |
| Total | 8 | 0 | 8 | 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 | 3 | 1 | 0 | 0 | 0 |
| Staff-on-inmate sexual abuse | 0 | 0 | 0 | 0 | 0 |
| Total | 3 | 1 | 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 | 1 | 7 | 0 |
| Staff-on-inmate sexual abuse | 0 | 0 | 3 | 0 |
| Total | 0 | 1 | 10 | 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 | 8 | 0 |
| Staff-on-inmate sexual harassment | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 8 | 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: | 11 |
|--|----|

| | |
|---|---|
| <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 checked="" type="radio"/> Yes</p> <p><input 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>8</p> |
| <p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input 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 checked="" type="radio"/> Yes</p> <p><input 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>3</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 checked="" type="radio"/> Yes</p> <p><input 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>8</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>8</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 checked="" type="radio"/> Yes</p> <p><input 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> |

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

Non-certified Support Staff

| | |
|---|---|
| <p>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.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
|---|---|

AUDITING ARRANGEMENTS AND COMPENSATION

| | |
|--|---|
| <p>121. Who paid you to conduct this audit?</p> | <p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p> |
|--|---|

| | |
|--|---|
| <p>Identify the name of the third-party auditing entity</p> | <p>Correctional Consulting Services (formerly PREA Auditors of America)</p> |
|--|---|

| Standards | |
|--|--|
| Auditor Overall Determination Definitions | |
| <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) | |
| Auditor Discussion Instructions | |
| <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> | |

| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
|---------------|--|
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • TDCJ Policy, BP-02.09 (rev. 2), Prison Rape Elimination Act Ombudsman Policy Statement, dated October 31, 2019 • Institution Organizational Chart • TDCJ Organizational Chart • TDCJ, Executive Directive, ED-03.03 (rev. 4), Safe Prisons Program, dated September 17, 2019 • TDCJ, Safe Prisons/PREA Operations Manual, 06.01, Unit Safe Prisons/PREA Program Awareness Training, dated February 2020 • TDCJ, Offender Orientation Handbook, I-202, (rev. February 2017) |

Interviews with the following:

- PREA Coordinator (PC)
- Unit Safe Prison/PREA Manager

Through the interview process TBCJ PC and the institution USPPM, indicated the USPPM has the responsibility to ensure the institution's compliance with the PREA standards and have the authority to address all PREA issues.

Through the interview process the USPPM, indicated there was sufficient time to complete PREA responsibilities. It is evident the USPPM is deeply knowledgeable with the expectations and responsibilities of the position and can fulfill them.

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 institution, as well as any contracts over which it has control. 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.

TDCJ Policy, BP-02.09 (rev. 2), Prison Rape Elimination Act Ombudsman Policy Statement, dated October 31, 2019, p. 1 states it is the policy of the Texas Board of Criminal Justice (TBCJ) that the Prison Rape Elimination Act (PREA) Ombudsman shall coordinate the Texas Department of Criminal Justice's (TDCJ) efforts to comply with the PREA standards in all its correctional and community residential facilities.

TDCJ, Safe Prisons/PREA Operations Manual, 06.01, Unit Safe Prisons/PREA Program Awareness Training, dated February 2020, states the Unit Safe Prisons/PREA Manager (USPPM), shall ensure all unit 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.

TDCJ, Executive Directive, ED-03.03 (rev. 4), Safe Prisons Program, dated September 17, 2019, states the TDCJ has zero tolerance toward all forms of sexual abuse and sexual harassment. The TDCJ shall be vigilant in establishing a safe environment for staff and offenders to all secure correctional facilities. Every attempt shall be made to protect offenders who are at risk of harm by others, take an initiative-taking approach to prevent, detect, and respond to incidents of sexual abuse and sexual harassment of offenders, reduce incidents of extortion, and address the needs of offenders who have been victimized. Violators shall be subject to criminal charges and civil liability in state or federal court, as well as TDCJ disciplinary action.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, forward p. ii, states the Texas Department of Criminal Justice (TDCJ) has a zero tolerance for all forms of sexual abuse and sexual harassment of offenders. The TDCJ shall take a

proactive approach concerning the detection, prevention, response, and punishment of sexual abuse, including consensual sexual contact while in TDCJ custody. The TDCJ shall be vigilant in establishing a safe environment for staff and offenders at all secure correctional facilities and take immediate action to address the protective needs of offenders who have been victimized. Every attempt shall be made to prevent the sexual abuse and sexual harassment of offenders in accordance with agency policy, ED-03.03, "Safe Prisons/PREA Programs," directs the TDCJ to develop and implement a plan to govern the operation of the Safe Prisons/PREA Program.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, pp. 2-6, provides definitions for wording within the policy. Additionally, the policy outlines staff responsibilities, procedures for the prevention of, response to, and the reporting and investigation of sexual abuse and sexual harassment.

Definitions are also provided in TDCJ Policy, BP-02.09 (rev. 2), Prison Rape Elimination Act Ombudsman Policy Statement, dated October 31, 2019, pp. 2-4.

TDCJ, Offender Orientation Handbook, I-202, (rev. February 2017), p. 2, addresses the TDCJ and LeBlanc Unit zero tolerance policy against sexual abuse and sexual harassment. Any sexual conduct, whether inmate-on-inmate or staff-on-inmate, whether consensual or coerced, is prohibited. The Offender Orientation Handbook is available in English and Spanish.

TDCJ, as well as the facility, policy and procedure are consistent with the PREA standards.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, specifically addresses the requirements of this provision. Additionally, it identifies the role of the Safe Prisons/PREA Management Office (p. 7), TDCJ Safe Prisons/PREA Manager (p. 7), Regional Safe Prisons/PREA Manager (p. 8), and Unit Safe Prisons/PREA Manager (p. 8). The reviewed policy is consistent with the PREA Standards and outlines the agency's approach to sexual safety.

The positions and hierarchy within the Texas Board of Criminal Justice (TBCJ) and Texas Department of Criminal Justice (TDCJ) for PREA personnel was confirmed through a review of the agency PREA organization chart. The positions and hierarchy within LeBlanc Unit for PREA personnel was confirmed through a review of the facility PREA organization chart.

TDCJ, Executive Directive, ED-03.03 (rev. 4), Safe Prisons Program, dated September 17, 2019 states the director of the Correctional Institutions Division is appointed as the safe prisons coordinator and shall establish the TDCJ Safe Prisons Program to ensure every effort is made to maintain a safe and secure environment for staff and offenders. The PREA Coordinator (PC) is classified at the Executive Level as confirmed through a review of Texas Board of Criminal Justice (TBCJ) organizational chart. The PC has six (6) PREA Compliance managers who report to her. According to the TBCJ organization chart, the PC reports directly to the Chairperson of the Texas Board of

| | |
|--|--|
| | <p>Criminal Justice.</p> <p>The PC is a full-time position dedicated solely to PREA compliance. The PC feels there is sufficient time to manage the PREA related responsibilities. Each unit within the facility has one PREA Compliance Manager (USPPM). The USPPM reports directly to the Senior Warden of the facility.</p> <p>Provision (c)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, pp. 7-8, establishes, identifies, and outlines the roles and responsibilities of the USPPM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the USPPM to coordinate the institutions efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards and outlines the agency’s approach to sexual safety.</p> <p>The USPPM reports directly to the Senior Warden of the facility, which was confirmed by a review of the institutional organizational chart.</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 zero tolerance of sexual abuse and sexual harassment: PREA coordinator.</p> |
|--|--|

| | |
|---------------|---|
| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ). • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Contract Administrator <p>The interview notes of the Agency Contract Administrator indicate TDCJ contracts include verbiage related to the vendors obligation to comply with PREA standards prior to entering into agreement with the agency. If the entity is not PREA compliant the contract will not be executed. The contract administrator pointed out:</p> |

a. A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.

b. Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

According to the Agency Contract Administrator, there are thirty-four total contracts for the confinement of TDCJ inmates. There are eleven secure contract facilities; eight residential corrections centers (RCC); and fifteen transitional treatment centers (TTC).

Provision (a)

Pre-Audit Questionnaire (PAQ) revealed the Texas Department of Criminal Justice (TDCJ) requires all entities who contract with them for the confinement of inmates to adopt and adhere to PREA standards. All agency contracts for confinement of inmates contain PREA specific language, expectations, and requirements. The facility does not individually contract for the confinement of inmates.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, states any new contract or renewal with entities for the confinement of offenders shall adopt and comply with TDCJ policies and procedures (which include PREA).

The PREA compliance results for the contracts for confinement of inmates with other entities are managed by the contract manager in accordance with the verbiage of the contract that is in place with each entity.

Provision (b)

According to the Agency Contract Administrator, the policies and procedures of each contractor are reviewed by TDCJ who ensure appropriate adherence to the national standards. Each entity is contractually required to notify the TDCJ of any PREA allegation; as well as forward a copy of the allegation, investigation, and findings to the agency PREA Coordinator for review.

Conclusion:

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 inmates.

| | |
|---------------|--|
| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- Facility Annual Staffing Plan Review for 2017; 2018; 2019; 2020
- TDCJ, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019.

Interviews with the following:

- Warden
- Institutional PREA Compliance Manager (IPCM)
- Intermediate-or-Higher Level Facility Staff
- Random Staff

Interviews with both the Warden and the USPPM indicated they both conduct random reviews of the staffing levels. Further they examine how staffing levels affect the inmate programming, various classification amounts, as well as any changes or modifications to the video monitoring. They also review other concerns which include physical plant configuration, internal or external oversight bodies, inmate population composition, placement of supervisory staff, line-staff needs and any prevalence of substantiated or unsubstantiated incidents of sexual abuse. Additionally, the Warden stated during staff meetings, staffing plan compliance and any deviations from the staffing plan is frequently discussed.

There was one interview conducted with intermediate or higher-level staff. This interviewee stated intermediate and higher-level staff make unannounced rounds routinely and document them in the unit logbook. During random informal conversations with staff, the staff stated the supervisors conduct unannounced rounds and document them in the logbook. This was validated by the Auditor through a review of the several logbooks.

Through the interview process, it was indicated supervisors tour their units and areas regularly throughout each shift, converse with staff of all levels as well as inmates, and audit, review and sign logbooks or irregularities. During the time, the Auditor was on-site; supervisors were observed walking and working in various capacities throughout the facility.

During the interview process, random staff verbalized the prohibition of staff alerting each other when a supervisor is making their rounds.

Through the interview process the USPPM and other executive staff indicated routine reviews of the staffing levels, how they affect the inmate programming, various classification counts, as well as any changes or modification to the video monitoring system are consistently conducted.

There were interviews and informal discussions with intermediate or higher-level staff.

These interviews and discussions affirmed staff are making unannounced rounds to all areas of the facility, with no warning to staff.

Provision (a)

The PAQ indicates the facility has a staffing plan, and the plan addresses each of the thirteen items listed in Provision (a). In addition, the facility Staffing Plan indicates it is the policy of the facility to ensure that all relieved posts are staffed at the times specified.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, pp. 7-8, identifies the PREA Coordinator as being responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2.

The data is utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution.

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 inmate population of 1,224.

The PAQ confirms the average daily number of inmates during the past 12 months was 1,141.

Reviews of other concerns, such as the physical plant configuration, internal or external oversight bodies, inmate 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 (b)

The facility has established a minimum staffing requirement. In the event a mandatory post is vacant, the post is filled with overtime staff or staff redirected according to the level of the post. Texas Department of Criminal Justice (TDCJ),

Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 11, number 2, states in circumstances where the staff plan is not complied with, the unit shall document and justify all deviations from the plan. The Shift Supervisor as well as the USPPM indicated, when asked, that deviations could occur for the following reasons:

- 1 Off Unit Transport
2. Constant Direct Observation
3. Hospital Security
4. Staffing
5. Major Projects

Provision (c)

Policy requires the staffing plan review be completed in consultation with the PC and other executive staff at least annually.

The Auditor was provided a copy of the most recent Annual Staffing Plan Review. This review discussed the staffing plan, video monitoring and the resources needed to adhere to the staffing pattern.

Policy requires an internal audit of the staffing plan be conducted on an annual basis. This assessment is an extensive review of all areas of the facility to ensure adequate staffing levels exist where inmates may be present. Justification for the need for additional staff or modifications to the facility, to include the deployment of video monitoring equipment, is addressed on an annual basis.

The annual review of the staffing plan includes facility and department management level staff which include the PC and other institutional Executive Staff.

The Auditor reviewed shift rosters for respective shifts and was able to verify that an assigned staff member covered every mandatory post.

The facility has camera coverage and supplemental convex security mirrors coverage in the facility. Trained staff monitor camera and video surveillance 24 hours a day. These cameras enhance the level of safety and security for staff and inmates.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, B, 1, states security supervisors at each unit shall conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment. These rounds shall be conducted during all shifts in accordance with applicable post orders.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, B, 1, expressly prohibits staff from alerting other staff members that supervisor rounds are occurring. Further it states that any staff member who does alert other staff of the unannounced rounds will be disciplined in accordance with PD-22, General Rules of Conduct and Disciplinary Action Guidelines for Employees.

Policy dictates all unannounced rounds are documented on the Employee and Visitor Log for each unit. The logs reflected unannounced rounds are being conducted per the standard. This was confirmed through staff interviews and the review of several

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| | <p>Employee and Visitor Log.</p> <p>During the days, the Auditor was on site; numerous supervisors were observed walking and working in various capacities throughout the facility. When interviewing inmates, it was confirmed the USPPM, and other supervisory staff routinely walk around and through the institution and are visible and available to all inmates.</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 regarding Supervision and Monitoring, ensuring that the safety of staff and inmates is a priority.</p> |
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| 115.14 Youthful inmates | |
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| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Material Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • The Texas Department of Criminal Justice, (TDCJ) Correctional Institutions Division, Safe Prisons/PREA Plan, dated February 2019 <p>Observations during on-site review</p> <p>During the on-site tour, the Auditor did not observe a youthful inmate.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden • Unit Safe Prison PREA Manager <p>Provision (a)</p> <p>On the PAQ, the facility reported they do not house youthful inmates. In interviews with the Warden, he confirmed the facility does not house youthful inmates.</p> <p>The TDCJ, Correctional Institutions Division, Safe Prisons/PREA Plan, dated February 2019, p. 10, specifies guidelines of how youthful offenders would be managed if they were in the facility.</p> <p>Provision (b)</p> <p>N/A</p> <p>Provision (c)</p> |

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| | <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 youthful inmates.</p> |
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| 115.15 | Limits to cross-gender viewing and searches |
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| | <p>Auditor Overall Determination: Meets Standard</p> |
| | <p>Auditor Discussion</p> |
| | <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Warden PREA Statement of Fact, 115.15 Limits to cross gender viewing and searches. dated April 1, 2023 • 2022 PREA training records for facility staff <p>Observations made during on-site review</p> <p>During the facility tour, opposite gender staff were observed entering the housing units and announcements of their presence was made. The Auditor was also announced by staff when entering inmate housing and restroom areas as she was of opposite gender.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Random Staff • Random Inmates <p>Random staff interviewed indicated there were sufficient male staff members available to conduct any searches that needed to occur, and that male staff would be diverted to address this issue if needed.</p> <p>During formal interviews and information conversations with staff, staff recalled having the training specific to this and reported that cross gender strip searches or cross gender body cavity searches do not occur at this facility.</p> <p>During formal interviews and information conversations with inmates, each inmate confirmed they had never been part of a cross gender search.</p> <p>Inmates interviewed reported female staff announce their presence when entering living areas, and always announce and wait extended periods of time before entering</p> |

the bathroom areas. Every inmate interviewed confirmed they were able to dress without being viewed by staff of the opposite gender.

During formal interviews and information conversations with inmates all reported hearing opposite gender staff announce their presence when entering the housing unit. All staff interviewed reported that opposite gender staff announcements are made when entering the housing units.

Provision (a)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, number 3, specifies that staff shall not conduct cross-gender strip searches or cross-gender visual body cavity searches, such as a search of the anal or genital opening, except in exigent circumstances or when performed by medical practitioners in accordance with AD-03.22, "Offender Searches."

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, number 4 indicates in exigent circumstances, unit staff shall document all cross-gender strip searches and cross-gender visual body cavity searches for male offenders, and all cross-gender visual body cavity searches or pat-down searches for female offenders. Number 5 on the same page states These searches shall be documented on an Inter-Office Communication containing a supervisor's signed approval and filed with the USPPM.

Provision (b)

During formal interviews and information conversations with staff, each staff member confirmed they had never been part of a cross gender search. When asked how the female staff would proceed if a male staff member was not available, they indicated there is always a male staff member on duty, who can be directed to the area to conduct the search. All staff recalled receiving training on opposite gender searches; however, each of them articulated that in all instances cross gender searches are not conducted at the facility. All staff (both male and female) reported cross gender strip searches or cross gender body cavity searches do not occur at this facility.

Provision (c)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, number 4, indicates in exigent circumstances, unit staff shall document all cross-gender strip searches and cross-gender visual body cavity searches for male offenders, and all cross-gender visual body cavity searches or pat-down searches for

female offenders. Number 5 on the same page states These searches shall be documented on an Inter-Office Communication containing a supervisor's signed approval and filed with the USPPM. The reviewed policy is consistent with the PREA standard.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, number 6, proclaims Correctional officers shall make best efforts to allow offenders to shower, perform bodily functions, and change clothing without 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. Staff of the opposite gender shall announce their presence when entering an offender housing area in accordance with applicable post orders. Under no circumstances shall an offender search be conducted solely for the purpose of determining an offender's genital status.

On the PAQ, the facility indicated they allowed inmates 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. Further the PAQ indicated opposite gender staff are required to announce their presence when entering an inmate housing unit.

When staff were specifically asked would transgender or intersex inmates be able to shower privately, the answer was affirmative. 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 inmate would have the opportunity for input into the decision-making process of alternative shower times and the inmate's input would carry great weight in the decision-making process.

Provision (e)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 34, number 2 states Correctional staff shall be trained in the methods of conducting cross- gender, transgender, and intersex offender pat-down searches to ensure the searches are conducted professionally and respectfully, in the least intrusive manner possible, but with attention to security needs.

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

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 an inmate's genital status.

Provision (f)

The Auditor reviewed copies of the 2022 PREA training sessions for 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

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| | <p>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 inmates. Additional training documents provided directions to staff on proper documentation practices when cross gender searches were conducted.</p> <p>When female staff were asked how they would proceed if a male staff member were not available, each indicated there was never an instance when male staff is not on duty and would be directed to the area to conduct the search to ensure cross gender searches are not performed. All staff interviewed recalled receiving training on opposite gender searches; however, each of them articulated that in all instances female staff do not conduct cross gender searches and will always defer to a male staff member to complete the search. During the facility tour, opposite gender staff were observed entering the housing units and announcements of their presence were made. The opposite gender Auditor was also announced by staff when entering the inmate housing and restroom areas.</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 the limits to cross-gender viewing and searches.</p> |
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| 115.16 | Inmates with disabilities and inmates 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • TDCJ, Correctional Institutions Division, Inter-Office Communication, Spanish Interpreters dated January 26, 2022. • Annual PREA Training Fiscal Year 2022 • 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. PREA educational information was permanently painted on the walls of the institution.</p> |

Interviews with the following:

- Warden
- Inmates with disabilities or LEP

Through the interview process, the Warden shared the facility has established procedures to provide inmates with disabilities or inmates 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.

The Auditor interviewed twenty-one targeted inmates. One inmate was Limited English Proficient (LEP); nine were physically disabled; two were visual impaired; three were hearing impaired, and two were cognitively disabled; one reported abuse; one disclosed victimization during screening; and two were gay or bisexual.

The LEP inmate stated PREA information was offered in English and Spanish. Further indicating language was not a barrier in programming or work assignments. The physically disabled inmates reported they felt safe and did not feel at a disadvantage due to their physical disability. The inmates with cognitive disabilities indicated a clear understanding of the PREA guidelines and were able to articulate multiple methods by which allegations could be reported. The hearing-impaired inmates stated they were able to function with the assistance of staff. The visually impaired inmates were able to see through corrective lenses. The gay/bisexual inmates stated they felt they were being treated fairly. The inmate who disclosed victimization during screening was offered a mental health referral. The inmate who reported abuse reported being treated fairly. Further the staff conducted their responsibilities, and notification of the outcome of the investigation was made.

Provision (a)

According to the PAQ, the facility has procedures to provide disabled inmates and limited English proficient inmates 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.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 33, number 4, establishes Offenders shall be provided education in formats accessible to all offenders, including those who are limited English proficient, deaf, hard of hearing, blind, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills.

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

In the event a staff 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 inmates 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)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, pp. 32-33, denote numerous items relative to ensuring each inmate is given information in verbal and written form, and that all information regarding TDCJ PREA policy is understood by the inmate. Additionally, it dictates inmate PREA education information will be distributed within the first 24 hours and include: Prevention of sexual abuse and harassment; self-protection; methods of reporting; and treatment and counseling availability.

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

Provision (c)

TDCJ, Correctional Institutions Division, Inter-Office Communication, Spanish Interpreters, dated January 26, 2022, provide a listing of staff who are assigned as interpreters for their units.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 21, 3, states Offenders with limited English proficiency shall be provided meaningful access to information regarding TDCJ efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 21, 3, a-b, states when seeking interpreters, staff shall not rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties described within this plan, or the investigation of the offender's allegations. Staff shall follow appropriate TDCJ policies and procedures for obtaining a qualified interpreter.

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 inmates with disabilities and inmates who are limited English proficient. No recommendations or corrective action is required.

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| 115.17 | Hiring and promotion decisions |
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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.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division,
- Safe Prisons/PREA Plan, February 2019
- Personnel record reviews for current employees, new employees and employees receiving promotions.

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 TDCJ 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. Additionally, the HRM stated background checks are conducted on all staff twice a year; once in their birth month and again six months later. The Auditor conducted a review of the requested personnel files and verified that all the files reviewed contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks. The three questions listed under Provision (a) were asked and answered on all documents as required by the standard. Additionally, these three questions are asked, answered, and documented by staff annually.

Further, regarding hiring practices, the HRM indicated that the potential hire is required to fill out personnel documents, which require the disclosure of the standard required items. The HRM stated the TDCJ 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. Additionally, the HRM stated background checks are conducted on all staff twice a year; once in their birth month and again six months later. The Auditor conducted a review of the requested personnel files and verified that all the files reviewed contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks. The three questions listed under Provision (a) were asked and answered on all documents as required by the standard. Additionally, these three questions are asked, answered, and documented by staff annually.

Through the interview process, the HRM indicated the TDCJ requires background checks on all new hires, promotions, and existing staff every five years. Additionally, the TDCJ conducts background checks on each employee every six months, in their

birth month and six months after.

During the interview with the HRM, it was 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.

Through the interview process the HRM indicated the agency has a centralized database, located in Huntsville, Texas, which tracks the completion of all background checks, and tracks the due dates of the five-year criminal history background check.

Provision (a)

The PAQ reflects 285 staff and 169 people hired who may have contact with inmates who have had criminal background record checks. The facility also reported twenty-seven contractors and six volunteers.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 38, A, 1, states the TDCJ shall not hire or promote anyone who may have contact with offenders, and shall not enlist the services of any contractor who may have contact with offenders, who previously:

- Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42 USC 1997;
- Has been convicted of engaging or attempting to engage in sexual activity in the community that was facilitated by force, overt or implied of force, coercion, or if the victim did not consent, refused, or was unable to consent or refuse; or
- Has been civilly or administratively adjudicated to have engaged in the activity described in Section VIII.A.1.b.

The Auditor reviewed a random sampling of fifty staff and contractor records. Each of the records reviewed contained all items required by the standard, which included documentation and criminal history check information.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 38, A, 2, states the TDCJ shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 40, C, 1, indicates before hiring new employees who may have contact with offenders, the TDCJ shall:

- Perform a criminal background check; and
- Attempt to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse, in accordance with federal, state, and local law.

According to the PAQ, in the past 12 months, there have been 169 individuals hired who may have contact with inmates who have had criminal background record checks:

The Auditor conducted a review of new hire personnel records and verified that all files reviewed contained the items required by the standard, including the PREA documentation and verification of the completed criminal history checks.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 40, C, 2, indicates a criminal background check shall be performed before enlisting the services of any contractor who may have contact with offenders.

According to the PAQ, in the past 12 months, there were six contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates:

According to the PAQ, there are twenty-seven contractors who might have contact with inmates. The TDCJ conducts background checks on each contractor every six months, on their birth month and six months after. The facility provided information for review indicating 100% of the contractors had up to date criminal background history checks.

Provision (e)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 40, C, 3, specifies criminal background checks shall either be conducted at least every five years for current employees and contractors who may have contact with offenders, or a system shall be in place to otherwise attain the information for current employees.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39, A, 4, states material omissions regarding misconduct of this nature, or the provision of materially false information, shall be grounds for termination.

The TDCJ conducts a criminal background records check, upon application, when being considered for a promotion, and every five years on all current employees and contractors. Additionally, per the HRM, TDCJ conducts background checks on each employee every six months, in their birth month and six months after.

Provision (f)

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| | <p>During the interview with the HRM, it was reported all applicants and employees who may have contact with inmates 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.</p> <p>Provision (g)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39, A, 4, states material omissions regarding misconduct of this nature, or the provision of materially false information, shall be grounds for termination.</p> <p>Provision (h)</p> <p>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. It would be shared upon request from an institutional employer for whom such employee has applied for work.</p> <p>Conclusion:</p> <p>Because the agency conducts background checks on employes twice a year and based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility exceeds the standard regarding hiring and promotion decisions.</p> |
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| 115.18 | Upgrades to facilities and technologies |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Observations during on-site review</p> <p>During the facility tour the auditor observed the cameras and security mirrors.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden <p>During the interview with the Warden, it was indicated there was camera coverage in</p> |

the facility, which is complimented by security mirrors.

During the interview process the Warden reported any construction, renovation or modification would be done with full consideration of all PREA standards. He further reported 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 supervisors and managers to discuss any pertinent issues, such as Data/Reporting issues, Grievances, Disciplinary Reviews, Video Summary Reviews, Use of Force Incidents, Incidents of Sexual Abuse, as well as the analysis of key data such as overtime, leave time, morale, etc.

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.

On the PAQ, the facility reported the agency/facility has not installed or updated the video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.

Provision (b)

During the interview with the Warden, it was indicated there was camera coverage in the facility, which is enhanced by security mirrors.

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 upgrades to facility and technology.

| 115.21 | Evidence protocol and forensic medical examinations |
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| | <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.• Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019• Texas Department of Criminal Justice, Safe Prisons/PREA Operations Manual, 05.01, Sexual Abuse Response and Investigation, dated February 2020• Texas Department of Criminal Justice, Safe Prisons/PREA Operations Manual, |

02.02, Offender Victim Representatives, dated February 2020

- Texas Department of Criminal Justice (TDCJ), Offender Victim Representative (OVR), Handouts

Interviews with the following:

- Random Staff
- SAFE/SANE Staff
- Unit Safe Prisons/PREA Manager (USPPM)

During the interview process random staff indicated the rules of evidence, and their understanding of the process should an inmate report alleged sexual abuse. 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.

During the interview process the USPPM indicated in the past twelve months there was one exam performed by SANES/SAFEs.

During the interview process the USPPM indicated victim advocacy services are offered through unit staff who are specifically trained to be an OVR. The USPPM stated that all requirements of PREA have been incorporated into the training for OVRs. During the examination, the inmate meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through the OVR, in collaboration with mental health services.

Through the interview process, the SAFE/SANE representative confirmed the forensic examinations are provided at no cost to the inmate. All forensic services are provided when the inmate alleges sexual abuse, sexual assault, or sexual battery. Forensic examinations consist of an assessment, documentation, and collection of evidence as outline in the Attorney General's "Adult and Child Sexual Assault Protocols: Initial Forensic Physical Examination.

Provision (a)

On the PAQ, the facility reported it is responsible for conducting administrative investigation within the facility. Further, the PAQ reflects, the Office of the Inspector General (OIG) is responsible for conducting all criminal investigations. All PREA allegations are referred to the OIG for review for possible criminal charges.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, V, A, 1, states all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, V, A, 2, states The protocol shall be developmentally appropriate for youth, where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice 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.

According to the PAQ, the facility does not house youthful offenders.

Provision (c)

According to the PAQ, all treatment services are provided to the victim without financial cost. Further, the PAQ indicates all forensic examinations have been completed at the nearest hospital emergency department. Texas State Law (SB-1191) requires that ER staff have specialized training to complete a forensic examination but does not require that be SANE or SAFE training. When possible SAFE or SANE will be utilized.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 13, F, 5, states all offender victims of sexual abuse shall be offered access to forensic medical examinations, whether on-site or at an outside medical facility, without financial cost, where evidentiary or medically appropriate. Such examination shall be performed by a sexual assault forensic examiner (SAFE) or sexual assault nurse examiner (SANE) when possible. If neither a SAFE nor SANE can be made available, the examination may be performed by other qualified medical practitioners in accordance with CMHC policies. Efforts to provide a SAFE or SANE shall be documented.

SAFE/SANE personnel reported the Forensic Program is responsible for conducting all forensic medical examinations for the facility. SANE personnel are available 24/7/365; however, if unforeseen circumstances arise and SANE personnel cannot perform the exam, an ER physician and ER registered nurse with a minimum of two hours of forensic evidence collection training may perform the exam. The exam starts with an explanation of the exam and written consent from the patient. From there the SANE will gather demographic information and past medical and surgical history. Details of the assault will be documented in the patient's words in the forensic medical record. After all information is obtained, the SANE will do a head- to-toe assessment, document trauma, and take photographs with the patient's consent. A detailed genital exam will be done with the use of high-resolution digital imaging with the patient's consent. Forensic evidence is collected in conjunction with the head-to-toe assessment and genital assessment. Evidence is packaged and secured while maintaining chain of custody until it can be released to law enforcement. After the exam, the SANE will discuss prophylaxis medication to prevent sexually transmitted infections, including HIV. If the patient is female, the SANE will also discuss emergency contraception options.

On the PAQ, the facility reported one forensic examination performed by SANES/SAFEs during the past twelve months.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, indicates attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the offender with victim advocate services.

At the time of the audit, information received regarding the allegations of sexual abuse in the past twelve revealed a total of eleven allegations reported. One was inmate-on-inmate and was investigated criminally. The Office of the Inspector General is the external agency that conducts the criminal sexual abuse investigations for TDCJ. This investigation remained open at the time of the on-site audit. The remaining ten were staff-on-inmate allegations and were investigated administratively. After investigation, two of these were deemed to be unfounded and eight were deemed to be unsubstantiated. Sexual abuse incident reviews were conducted on all unsubstantiated cases. All inmates were notified of the investigation outcomes in writing and the cases were closed.

At the time of the audit, information received regarding the allegations of sexual harassment the past twelve revealed a total of three allegations reported. One was inmate-on-inmate and two were staff-on-inmate. All three were investigated administratively and were deemed to be unsubstantiated. All inmates were notified of the investigation outcomes in writing and the cases were closed. Sexual abuse incident reviews are not required on sexual harassment investigations.

The Auditor reviewed eleven files of sexual abuse allegations and three files of sexual harassment allegations. In all cases the alleged victim was offered medical and mental health services. One was referred for a SANE examination and was provided a victim advocate.

Provision (e)

As stated in Provision (d) during the examination, the inmate meets the victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/or requested.

According to the PAQ, the Chaplain and the Chief of Classification are the designated, trained, Offender Victim Representatives (OVR) for the facility. The facility provided documentation of OVR training for these two individuals.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, a-b, state:

- a. As requested by the offender victim, the victim advocate or qualified TDCJ staff member, or qualified community-based organization staff member shall:

1. Accompany and support the victim through the forensic medical examination process and investigatory interviews;
2. Provide emotional support, crisis intervention, information, and referrals; and
3. Not delay or otherwise impede the screening or stabilization of an emergency medical condition.

b. For the purposes of this section, a qualified TDCJ staff member is an offender victim representative (OVR). A review of the TDCJ, Offender Victim Representative (OVR) training curriculum, training handouts, as well as training records confirmed all OVR personnel had completed the required training required by TDCJ policy.

Provision (f)

As reported in Provision (a) all PREA allegations are forwarded to the Office of the Inspector General (OIG) for review for possible criminal charges. The OIG is responsible for conducting all criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct.

Provision (g)

Auditors are not required to audit this provision.

Provision (h)

As reported in Provision (d) victim advocacy services are offered through unit personnel who have received specialized training to be an OVR.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 2, a-c, states:

- a. The warden shall designate at least two OVRs. An OVR shall be a mental health clinician, sociologist, chaplain, social worker, or case manager who has completed the TDCJ Sexual Assault Offender Victim Representative training.
- b. Wardens shall coordinate with the SPPMO when a newly designated OVR requires training.
- c. The function of an OVR shall not begin until such training is received.

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 evidence protocol and forensic medical examinations.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- PREA Investigation Records

Interviews with the following:

- Random Staff
- Investigative Staff

Through the interview process random staff indicated they knew 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 immediately report to their shift supervisor.

Through the interview process, investigative staff indicated all allegations are investigated. All allegations are referred to the OIG for review for possible criminal prosecution. The ones which are criminal in nature are fully investigated by OIG. If evidence supports criminal prosecution, prosecution is pursued. If not, it is kicked back to the facility for administrative procedures.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p 27, C, 1, mandates allegations of sexual abuse and sexual harassment shall be referred to the OIG for investigation. These referrals shall be documented on the appropriate investigative forms contained within AD-02.15, "Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents," for staff-on-offender allegations and the SPPOM for offender-on-offender allegations.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, D, 1-2, indicate 1. Sexual abuse and sexual harassment investigations alleged against staff shall only be conducted by a staff member with the rank of captain or above. Unit administrators shall ensure the investigating staff member is at least one rank above the accused staff member. If the OIG conducts administrative investigations against staff, the investigation shall be performed in accordance with OIG policies and procedures. 2. When the evidence supports criminal prosecution, OIG shall conduct compelled interviews only after consulting with prosecutors to ensure the interviews do not impede subsequent criminal prosecution.

At the time of the audit, information received regarding the allegations of sexual

abuse during the past twelve months revealed a total of eleven allegations reported. Eight were inmate-on-inmate sexual abuse allegations. All eight were investigated administratively and one was deemed to be unfounded and the remaining seven were deemed to be unsubstantiated. Four of those eight were referred for criminal review and investigation. Of the four referred for review and investigation, one was referred for prosecution and three were still under investigation at the time of the on-site audit.

The remaining three sexual abuse allegations were staff-on-inmate allegations. All three were investigated administratively and deemed to be unsubstantiated. Zero were referred for criminal review and investigation.

At the time of the audit, information received regarding the allegations of sexual harassment during the past twelve months revealed a total of eight sexual harassment allegations reported. All allegations were inmate-on-inmate. They were investigated administratively and deemed to be unsubstantiated.

The Auditor reviewed eleven files of sexual abuse allegations and eight files of sexual harassment allegation.

In all sexual abuse cases the alleged victim was offered medical and mental health services. One was referred for a SANE examination and was provided an OVR staff member as a victim advocate. All sexual abuse cases, except the one that was "unfounded" had a sexual abuse incident team review within 30-days of the completion of the investigation. Sexual harassment cases do not require a sexual abuse incident team review. All nineteen inmates were notified in writing of the results of the investigation in a timely manner.

Provision (b)

The policies regarding the TDCJ and the facility indicate there is an obligation to thoroughly investigate all matters relative to sexual abuse and sexual harassment are provided in Provision (a).

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p 27, C, 3-9, mandates:

1. N/A
2. N/A
3. Offenders shall be notified of relevant information regarding criminal investigations, in accordance with the SPPOM.
4. If an offender is determined to have been a victim of staff-on-offender sexual abuse, the warden shall inform the offender when: the staff member is no longer assigned to the offender's unit; or the staff member is no longer employed by the TDCJ.
5. If an offender is determined to have been a victim of staff-on-offender

sexual abuse and the abuse is determined criminal, the SPPMO shall inform the offender when:

a. The staff member has been indicted on a charge related to sexual abuse within the unit; or

b. The staff member has been convicted on a charge related to sexual abuse within the unit.

6. If an offender alleges to have been a victim of offender-on-offender sexual abuse, the SPPMO will subsequently inform the alleged victim when:

- The alleged assailant has been indicted on a charge related to sexual abuse within the unit; or
- The alleged assailant has been convicted on a charge related to sexual abuse within the unit.

7. The TDCJ SPPM shall ensure the relevant criminal information is received from the OIG to inform the offender.

8. All offender notifications or attempted notifications described in items 4-6 of this section shall be documented.

9. The requirement to provide offender notification shall terminate if the offender is released from the custody of the TDCJ.

Provision (c)

As stated in Provision (a) the agency and facility refer all allegations to the OIG for review and consideration for criminal prosecution.

As stated previously, TDCJ, Administrative Directive, AD-16.20 (rev. 4), Reporting Incidents/Crimes to the Office of the Inspector General, dated October 15, 2019, outlines how criminal matters are referred, as well as the responsibilities of those investigating the allegations.

Provision (d)

Auditors are not required to audit this provision.

Provision (e)

Auditors are not required to audit this provision.

Conclusion:

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 to ensure referral of allegations for investigations.

115.31 Employee training

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- Texas Department of Criminal Justice (TDCJ), FN-1811 (rev. 11/15)
- ACA/PREA Reference Card

Interviews with the following:

- Random Staff

Each of the staff members interviewed recalled attending the initial PREA training when they were hired or when PREA went into effect. All interviewed staff confirmed they receive annual, in-service PREA training, as well as additional shift turnout training.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, pp. 33-34, a-k, specifies that all employees who may have contact with offenders will be trained in a minimum of:

- a. Zero tolerance policy
- b. How to fulfill responsibilities for sexual abuse and sexual harassment prevention, detection, reporting and response
- c. Inmate's right to be free from sexual abuse and sexual harassment.
- d. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- e. The dynamics of sexual abuse and sexual harassment in confinement
- f. Common reactions of sexual abuse and sexual harassment victims
- g. How to detect and respond to signs of threatened or actual sexual abuse
- h. How to avoid inappropriate relationships with inmates
- i. How to communicate effectively with LGBTI and gender non-conforming inmates
- j. How to comply with relevant mandatory reporting laws

k. The common characteristics of victims and predators, sometimes referred to as red flags.

Each employee, contractor or volunteer who may have contact with an inmate is given a TDCJ, FN-1811 (rev. 11/15). This is a foldable pocket size card, which lists step by step what to do in an emergency. One of the emergency situations covered on this card are PREA allegations. It lists step by step what to do in the event of a PREA allegation. In addition to training all staff are required to keep this card on them while on duty.

The ACA/PREA Reference Card is an excellent training and reference tool created specifically for the staff. It is an excellent resource for staff on the housing units, when a PREA allegation is reported. This reference card provides names of contacts in the chain of command, names of Offender Victim Representatives, definitions pertinent to PREA, how to report allegations, what to do if an offender is at risk, the requirement to knock and announce when entering a housing unit, the importance of privacy screens, and who conducts investigations. All staff members interviewed had a reference card on their person. Some stated it made them feel more confident in the PREA procedures.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 34, C, 1, states all employees who have contact with offenders, including medical and mental health care practitioners, shall receive training as outlined in Section VI, B,1, at least every two years. In the interim years, employees shall be provided refresher information on current sexual abuse and sexual harassment policies. Every employee asked about this card immediately pulled it out and stated how they use the card to ensure there are no missteps in the PREA process.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 35, D, 2, indicates the level and type of training provided to volunteers and contractors shall be specific to the services provided and the level of contact with offenders; however, all volunteers and contractors who have contact with offenders shall be notified of the TDCJ's zero- tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures for reporting incidents.

The Auditor reviewed the PREA curriculum and training materials. 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 has incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the employee's classification with some specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed staff training records, conducted on staff from various categories. Each reviewed file 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 refresher training for the past twelve months which were confirmed by staff signatures, each of the employees had acknowledged receiving the PREA training.

Provision (b)

The policy regarding the TDCJ's and the facility's responsibility to provide training and education regarding Sexual Abuse and Sexual Harassment are provided in Provision (a).

The training provided by the TDCJ, addresses both male and female issues. However, the training has been tailored specifically to the male inmate 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 inmate population. The training curriculum did include training specific to transgender inmates.

As stated in Provision (a), the Auditor reviewed documentation for the training and verifying attendance of staff.

Provision (c)

Of the 285 staff presently assigned to the facility, the Auditor reviewed documentation that reflected all 285 staff or 100% of the staff have received PREA training in the past twelve months. Facility staff also receive refresher training every two years. The Auditor reviewed documents of the last refresher training in fiscal year 2022. The annual PREA training was conducted in the fiscal year 2022. The facility also provides additional PREA training annually, as well as shift training, staff meetings, educational materials, and posters.

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. Copies of these receipts were observed in every file reviewed by the Auditor. The receipts contained various dates which reflected separate training sessions.

In instances where a receipt for training material was not required, staff would sign up on a training sheet, verifying their attendance at the required training. The Auditor viewed copies of each training session for the past twelve months, reflecting training completed by facility staff.

Conclusion:

The ACA/PREA reference card each staff members carry with them daily combined with the review and analysis of the available evidence, the Auditor has determined that the agency/facility exceeds the standard which addresses policies regarding employee training.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- UTMB, Part 4, Prison Rape Elimination Act (PREA) Training, Curriculum, March 2020 UTMB Institutional Handbook of Operational Procedures
- UTMB OIG-UTMB New Employee Orientation PREA Training

Interviews with the following:

- Contractors
- Volunteers

The Auditor conducted one formal interview with contract staff members and one formal interview with a volunteer. The contractor and volunteer recalled having PREA training, stating it was specific to their roles or responsibilities in the facility. When the Auditor questioned them about their knowledge of PREA, they were able to identify what PREA was and more importantly, what their role or responsibility was in the event they were confronted with a situation of sexual abuse or sexual harassment. The contractor and volunteer demonstrated to the Auditor a comprehensive and complete understanding of the agency's zero-tolerance policy and how to address any instance when an inmate reports a PREA specific issue.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 35, D, 2, indicates at a minimum volunteers and contractors will be trained in the TDCJ's and the facilities zero tolerance policy regarding sexual abuse, sexual harassment and how to report such incidences.

UTMB, Part 4, Prison Rape Elimination Act (PREA) Training Curriculum, was reviewed by the Auditor. The core training materials contain all ten (10) of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the responsibilities and role of the contractor or volunteer.

The Auditor reviewed documentation indicating that 6 volunteers and 27 contractors, or 100%, have received PREA training in the past twelve months.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 35, D, 2, indicates the TDCJ will ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies. The level and type of training will be based on the services they provide and level of contact with the inmates.

However, all volunteers and contractors shall at a minimum be trained in the following:

1. Zero tolerance policy
2. How to report sexual abuse or sexual harassment

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 35, D, 4, indicates all full-and part-time medical and mental health care practitioners who work regularly in TDCJ operated facilities shall be trained in:

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

Provision (c)

As indicated in Provision (b) copies of the acknowledgment page from the PREA training is retained in each volunteer and contractor file. The Auditor reviewed the sign-in sheets from the PREA training sessions for the past twelve months. Each sign in sheet reflected acknowledgment signatures from contractors and volunteers for the PREA training they received.

Conclusion:

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 volunteer and contractor training.

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | Material Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, Attachment Q
- Texas Department of Criminal Justice, Offender Orientation Handbook, dated February 2017
- Texas Department of Criminal Justice, Unit Wardens Directive, Offender Safe Prisons/PREA Educational Video, dated May 15, 2014
- PREA Posters
- Miscellaneous Training Materials

Observations during on-site tour:

Around the facility there are a variety of PREA posters, in both English and Spanish. The facility has PREA murals painted on the walls of every building and housing unit. During the on-site, the Auditor observed these posters and paintings in every room throughout the facility.

Interviews with the following:

- Intake Staff
- Random Inmates
- Unit Safe Prison/PREA Manager (USPPM)

Through the interview process intake staff indicated inmates who enter the care and custody of the TDCJ are provided an Inmate Orientation Handbook upon admission. The inmate signs the acknowledgment form which is retained in the inmate file. Further they indicated they receive their PREA training immediately upon arrival, prior to their housing assignment.

Through the interview process the inmates indicated they remembered receiving written PREA materials and an Inmate Orientation Handbook. The interviewees reported the material they received included information about the facility's zero tolerance policy and ways to report. For those inmates who arrived prior to PREA going into effect, they recalled receiving the materials and attending training when PREA was implemented.

During the interview process, the inmates were able to briefly outline what they learned during PREA training. All responses were similar in nature and were generally: zero tolerance for sexual abuse or harassment, right to be free from sexual harassment and retaliation for reporting, who to talk to about a concern, who to report an incident to, to mail the OIG, and call the number on the posters around the facility.

Through the interview process the USPPM indicated if an inmate had a disability not covered under the training elements established by the facility, local disability assistance is brought in to ensure the inmate is able to understand and retain the

PREA materials to a comfort level of comprehension.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. VI, A, 1-6, indicates the offender PREA orientation and education will include:

- Information on PREA and the agency/facility zero tolerance standard relating to sexual assault
- How to report incidents or suspicion of sexual abuse or sexual harassment
- Within 30 days comprehensive education either in person or through video regarding their rights to be free from sexual abuse and sexual harassment, and any retaliation for reporting these incidents; and regarding agency/facility policies and procedures from responding to these incidents in accordance with the SPPOM.
- Information on how to prevent and reduce the risk of sexual violence, as well as explanation of appropriate methods of self-protection and intervention.
- Information on how to report sexual assault to staff, including contact information for the Office of Inspector General

TDCJ, Inmate Orientation Handbook, dated February 2017, p. 26, explains the agency's zero tolerance policy regarding sexual abuse and sexual harassment. Further explains how to report incidents or suspicions of sexual abuse and sexual harassment.

The Inmate Orientation Handbook, 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.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, Attachment Q, is the method of documentation of Safe Prison /PREA Program Offender Sexual Abuse Education. This form has a place for the printed inmate name, TDCJ ID number, inmate signature, date of training, unit where training was conducted, and who facilitated the training. A copy of this form is retained for documentary purposes.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, V, A, 1, states during the intake process, offenders shall be provided with educational information explaining the TDCJ's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment in accordance with the TDCJ Classification Plan and TDCJ Unit Classification Procedures Manual.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, V, A, 3, states offenders shall receive information as described in Section VI.A.1, if transferred to a different facility, to the extent that the policies and procedures of the new facility differ from those of the previous facility, or if there is no documented record the offender received the information.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 33, V, A, 4, indicates offenders shall be provided education in formats accessible to all offenders, including those who are limited English proficient, deaf, hard of hearing, blind, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills.

Each housing unit has multiple working telephones designated for inmate use. The inmates can have a family member call the PREA Ombudsman to report sexual abuse or harassment on their behalf. These calls are confidential. The inmate can write to the PREA Ombudsman and report sexual abuse or harassment. This was confirmed by the Auditor on the on-site tour.

Provision (b)

According to the PAQ, in the past twelve months there were 986 inmates who were admitted and whose length of stay at the facility was more than thirty days. The PAQ also reflected these inmates were provided the PREA information which included their right to be free from sexual abuse, as well as the policies and procedures for reporting. The PAQ reflected 100% of the inmates admitted to their facility in the past twelve months received the mandated information.

TDCJ, Unit Wardens Directive, Offender Safe Prisons/PREA Educational Video, dated May 15, 2014, states within 30 days of intake an offender shall be provided with comprehensive education either in person or through video regarding their rights to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. This video may be presented as a single presentation or in conjunction with the Peer Education Sexual Assault Awareness class. All offenders viewing the video shall sign the training roster to document completion of the training. Completed rosters shall be maintained by the USPPM. Also, completion data shall be entered on the Individualized Treatment Plan (ITP) to record offender participation in the training.

Provision (c)

As indicated in Provision (b) 100% of inmates who entered the facility during the past 12-month period received the required PREA training. At the time of PREA implementation, all inmates incarcerated at the facility were required to attend PREA training. Inmates arriving after implementation received their training at intake. This training, at intake, is facilitated through staff going over material and answering any questions the inmate may have.

Upon arrival, the inmate is also required to watch a PREA video and is provided an inmate Orientation Handbook and goes through the A&O process. At the end of the A&O process is a question-and-answer period to reinforce retention of the information presented. The information was documented with verification of the training retained in the inmate institutional record. This information is now electronically recorded in the program the TDCJ has implemented agency wide called SPPANS. This program and documentation were reviewed by the Auditor. SPPANS tracks all PREA

requirements, from intake to education to assessments and re-assessments. It sends out notices and reminders of time frames and deadlines of upcoming re-assessments, needed referrals, etc. It follows up with referrals that have been made, so the referring personnel know whether the referral has been completed as well as the results of the referral. With this program, no inmate will fall between the cracks or be overlooked. It collects, documents, and stores all information vital to PREA.

It tracks personal information, progress on investigations, it is coded in such a way that it prevents mistakes. Information must be entered in the correct format and all blanks must have a response or it will not allow you to proceed to the next screen. Since this program is agency wide, it also prevents information being lost from one facility to another. The SPPANS program is a real game changer for agency wide PREA compliance.

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 inmates are given orientation materials, including PREA related materials, before being assigned to a housing unit. This is a requirement for all inmates, whether they are a new intake or a transfer from another facility.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 33, VI, A, 4, requires that all offenders shall be provided education in formats accessible to all offenders, including those who are limited English proficient, deaf, hard of hearing, blind, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills.

The various training elements provided to the inmate population range from PREA documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish. They also have a list of staff interpreters on each housing unit.

As a back-up, anytime a translation service is needed and in the unlikely event an 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 inmates 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 (e)

As stated in previous provisions, all inmates sign a receipt of the Inmate Orientation Handbook, as well as for receipt of the Safe Prisons/PREA Program Offender Sexual Abuse Education. The original of these forms are maintained as documentation. A review of inmate records was conducted, and the signed acknowledgment document was in every file.

Provision (f)

It is evident the facility administration and the USPPM are dedicated to ensuring the

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| | <p>inmates receive crucial education about Sexual Abuse and Sexual Harassment. Using varying formats, the inmate population receives important information in user friendly, comprehensible ways. The Inmate Orientation Handbook is an excellent tool which specifically lays out the prevention of sexual violence, zero tolerance policy and includes multiple methods inmates can seek assistance regarding sexual violence.</p> <p>Conclusion:</p> <p>Every inmate encounter proved to be impressive with the amount of PREA knowledge the inmate population possessed. This combined with the PREA murals, the review and analysis of all the available evidence, the Auditor has determined the agency/ facility exceeds the standards for inmate education.</p> |
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| 115.34 | Specialized training: Investigations |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas Department of Criminal Justice, Training Records • OIG, NIC, PREA Training Test Results • Office of Inspector General, Sexual Assault Investigative Topics, Course 3201, dated June 2011 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Investigative Staff <p>Through the interview process, the investigative staff indicated specialized training had been completed by all investigative staff.</p> <p>Provision (a)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 34, B, 5, a-c mandates that sergeants and above, including Security Threat Group correctional officers and Safe Prisons/PREA officers, shall receive training on conducting sexual abuse investigations in confinement settings. Training shall include:</p> <ul style="list-style-type: none"> a) Techniques for interviewing sexual abuse victims. b) Sexual abuse evidence collection and handling; and |

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| | <p>c) Criteria and evidence required to substantiate an investigation.</p> <p>TDCJ, Training Records provided documentation of the specialized training required by this standard.</p> <p>The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for TDCJ employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the investigators received the general PREA training mandated for all TDCJ employees.</p> <p>OIG, NIC, PREA Training Test Results, confirmed all OIC investigators completed the required training and passed the curriculum post-test.</p> <p>According to the PAQ there are thirteen investigators. Through a review of training records and an interview with the facility investigator, the Auditor was able to confirm that all training requirements have been met.</p> <p>Provision (b)</p> <p>As indicated in Provision (a), through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.</p> <p>Provision (c)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, 34, 35, address this provision. The Office of Inspector General conducts all investigations, administrative and criminal, in TDCJ institutions.</p> <p>Provision (d)</p> <p>The Auditor is 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 every provision of the standard which addresses policies regarding specialized training: investigations.</p> |
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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- Correctional Managed Health Care Policy Manual, Number C-25, 1, Orientation Training for Health Services Staff, Dated October 30, 2013

Interviews with the following:

- Medical and Mental Health Staff

Through the interview process and a review of training documents by the Auditor, it was determined each of the medical and mental health care practitioners have attended the required training and meet all training requirements.

Provision (a)

Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 35, D, 4, a-d, states All full- and part-time medical and mental health care practitioners who work regularly in TDCJ operated facilities shall be trained in:

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

A review of the provided lesson plan/training materials demonstrate compliance with this training requirement.

Through a review of training records and an interview with the Warden, medical and mental health care practitioners, the Auditor was able to confirm that all training requirements have been met.

Currently there are contract and direct hire medical and mental health staff assigned to the facility. Through staff interview and review of training documents by the Auditor, each of the assigned staff members have attended the mandatory training and meet all training requirements.

Provision (b)

N/A - All medical staff at the facility are prohibited by procedure from performing forensic examination on sexual abuse victims.

Provision (c)

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| | <p>As indicated in Provision (a), through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.</p> <p>Provision (d)</p> <p>The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for TDCJ employees, contractors, and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the contracted and direct hire medical staff received the general PREA training mandated for all TDCJ employees.</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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| 115.41 | Screening for risk of victimization and abusiveness |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, Attachment E • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, Attachment E-1 • Texas Department of Criminal Justice, Offender Intake Processing Psychological Screening Interview, Form CI-69 (Revised 3/13) <p>Interview with the following:</p> <ul style="list-style-type: none"> • Staff Responsible for Risk Screening • Unit Safe Prisons/PREA Manager (USPPM) • Random and Targeted Inmates • Classification Staff <p>Through the interview process inmates were able to recall being asked questions relative to their concern for sexual safety, and if they felt like they were going to</p> |

harm themselves.

Through the interview process the USPPM indicated that medical staff, mental health staff, classification staff and the USPPM have access to intake and screening information. All information is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments.

Through the interview process, classification staff as well as the USPPM, indicated no inmate is disciplined for their refusal to answer questions during an assessment, rather each of them indicated they would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the inmate chose not to respond.

Through the interview process, classification staff indicated they monitor the inmate population, and will re-assess when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that may have bearing on the inmate's risk of victimization or abusiveness.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 16, B, 1, states all offenders shall be assessed during intake, and if transferred to another unit for permanent assignment, to determine the risk of being sexually abused by or sexually abusive toward other offenders.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 16, B, 2, mandates intake screening shall take place within 24 hours of arrival at the unit in accordance with the SPPOM.

As stated in (a), according to the listed policies all inmates must be screened within 72 hours of arrival.

The Auditor reviewed the PAQ which indicated in the past 12 months, 100% of 1,115 inmates were screened for the risk of sexual victimization or sexual abusiveness within 72 hours of their entry into the facility. A list of inmates' arrival dates and dates of evaluation demonstrate compliance with this standard.

From an alphabetical roster of inmates, the Auditor chose files of inmates to review. The files were for inmates from varying housing units, ethnic and racial backgrounds. The names were chosen from a complete alpha roster of inmates. The Auditor went down the list and randomly chose names, in no order or sequence, from the roster.

The Auditor reviewed inmate files to ensure they received the training and how that training was completed. All files had verification that the initial screening had occurred within 72 hours of arrival.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 16, B, 3, indicate assignments shall be made through the collaborative efforts of intake staff, the USPPM, and medical and mental health services by using objective screening instruments.

The Auditor reviewed a copy of the intake form and screening assessment form. Staff members who conduct intake screenings utilize the Texas Department of Criminal Justice, Offender Intake Processing Psychological Screening Interview, Form CI-69 (revised 3/13). Inmates who surpass the threshold on the screening form are referred to mental health for an additional assessment regarding their level of risk, environmental considerations, and treatment needs. The inmate is reassessed within thirty days, after the initial meeting.

The Auditor was able to verify compliance with this provision through the review inmate records, reflecting copies of the required assessments. A review of the Offender Intake Processing Psychological Screening Interview, Form CI-69, indicates the instrument is weighted and scored based upon responses to specific questions required in the Standard and Provision.

Provision (d)

The Auditor reviewed the SPPANS system and compared the questions with the requirements of Provision (d). All items required for Provision (d) have been included on the screening instruments. The included items are:

- What is the inmate's sexual orientation
- What is the inmate's gender identity
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming
- Whether the inmate has been a victim of sexual abuse while incarcerated, as an adult or juvenile
- Whether the inmate been a perpetrator of sexual abuse while incarcerated, as an adult or juvenile
- Whether the inmate has been a victim of sexual abuse anytime in the life outside of being incarcerated
- Whether the inmate has been a perpetrator of sexual abuse anytime in the life outside of being incarcerated
- Whether the inmate feels adequately familiar with the prison environment
- Whether the inmate is being approached or pressured by other inmates for sexual favors
- Whether the inmate was previously incarcerated
- Whether the inmate's criminal history is exclusively nonviolent
- Whether the inmate has prior convictions for sex offenses against an adult or child
- Whether the inmate has previously experienced sexual victimization
- The inmate's own perception of vulnerability.
- Whether the assessor notices or has knowledge of anything the inmate is not

reporting

Provision (e)

As stated in (a), the Auditor was able to review the intake process and interview classification staff who were able to explain the classification process.

Provision (f)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 17, B, 4, specifies within a period not to exceed 30 days from the offender's arrival at an intake facility, the offender shall be reassessed for risk of victimization or abusiveness following receipt of any additional or relevant information received by the TDCJ since the initial intake screening.

The Auditor reviewed the PAQ which indicated that within the past 12 months of the inmates in the facility longer than 30-days, 100% of 986 inmates were re-assessed for the risk of sexual victimization or risk of sexually abusiveness of other inmates within 30-days of their entry into the facility.

Of the inmates who arrived after PREA went into effect, everyone indicated they recalled being asked questions relative to this standard. Most indicated they recalled being interviewed within a couple of weeks after arrival.

A review of the inmate files confirmed they had been reassessed within the thirty-day timeframe.

Out of the reviewed inmate records, all had been reassessed within thirty days. The finished screening documents were completed by different staff, with each instrument being finalized consistent with the standard.

Provision (g)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 17, B, 5, indicates an offender's risk level shall be reassessed following a referral, request, incident of sexual abuse, or receipt of additional information that may affect the offender's risk of sexual victimization or abusiveness.

Provision (h)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 10, states offenders shall not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to Section III.B.3.

Provision (i)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, D, states Staff shall use appropriate controls to disseminate responses to questions asked pursuant to this plan within the units, ensuring that sensitive information is not

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| | <p>exploited to the detriment of any offender by staff or other offenders.</p> <p>As stated in (a), the Auditor interviewed classification staff. During that interview, the classification staff indicated access to the inmate’s classification information is secured, with controlled access by classification staff.</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 which addresses Screening for Risk of Sexual. Victimization and Abusiveness.</p> |
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| 115.42 | Use of screening information |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Inmate Files <p>Interview with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator (PC) • Staff Responsible for Risk Screening • Unit Safe Prisons/PREA Manager (USPPM) • LGBTI Inmates <p>Through the interview process the PC indicated according to TDCJ policy, the gender identification of each inmate is initially determined by their legal sex assignment, generally at birth; however, from that point forward every inmate is individually assessed and classified to ensure the safety of the inmate, as well as the safety of the inmate population.</p> <p>Through the interview process the PC and the USPPM, revealed that neither the TDCJ 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) inmates. All indicated that LGBTI inmates are housed within the general population unless specific issues are present and only then the appropriate staff will meet with the inmate and address the concerns.</p> <p>During an interview with LGBTI inmates, all reported they were housed in general</p> |

population and were not currently, nor had they ever been, housed in a housing unit designed for only LGBTI inmates. The Auditor reviewed an inmate roster and confirmed that all LGBTI inmates were housed in the general population.

During the interview process the PC, USPPM and staff responsible for screening, all indicated the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. They further confirmed that regular classification reassessments are conducted a minimum of every six months, or if the inmate engages in an incident of a sexual nature.

Through the interview process the USPPM and staff responsible for screening, all specified the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These inmates 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 USPPM indicated every assessment completed by staff is factored into the placement and programming of each inmate.

Further, the inmate's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every inmate, especially those at elevated risk of being sexually victimized, are separated from those at substantial risk of being sexually abusive.

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

During interviews with staff who are responsible for risk screening, it was indicated the transgender or intersex inmates 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 inmate is evaluated individually.

During interviews with LGBTI inmates, all reported they were housed in the general population and were not currently, nor had they ever been, housed in a housing unit designed for only LGBTI inmates. The Auditor reviewed an inmate roster and confirmed that all LGBTI inmates were housed in the general population.

There were zero transgender inmates assigned to the facility at the time of the on-site audit.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 1, specifies the Unit Classification Committee (UCC), or a similarly designed

committee for units without a UCC, shall use information from the risk screening document required by Section III.B of this plan to make housing, bed, work, education, and program assignments with the goal of separating offenders at high risk of being sexually victimized from offenders at high risk of being sexually abusive in accordance with the TDCJ Classification Plan and the TDCJ Unit Classification Procedures Manual.

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

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 2, indicates the committee shall make individualized determinations regarding how to ensure the safety of each offender.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 9 states when deciding to assign a transgender or intersex offender to a unit for male or female offenders, and when making other housing and programming assignments, consideration shall be made on a case-by-case basis with regard to the health and safety of the offender and potential management or security problems. Housing determinations shall not be made solely based on LGBTI status.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 9, a, indicates Placement and programming assignments for each transgender or intersex offender shall be reassessed semiannually to review any threats to safety experienced by the offender.

Provision (e)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 9, b, indicates a transgender or intersex offender's views with respect to his or her own safety shall be given thoughtful consideration.

Provision (f)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 9, B, 7, states offenders identified as transgender, or intersex shall be given the opportunity to shower separately from other offenders in accordance with Correctional Managed Health Care (CMHC) policies.

According to the PC, USPPM and the staff responsible for risk screening, each indicated the transgender or intersex inmate's views of their own safety is given serious consideration when providing showering options. In addition, they clarified, transgender or intersex inmates would be able to shower separately from other

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| | <p>inmates by utilizing alternate shower times. As previously identified, each of the housing units have bathrooms with shower stalls that have screens or doors for use by transgender inmates for additional privacy, if desired. The random staff who were interviewed indicated that if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates.</p> <p>Provision (g)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 8, states LGBTI offenders shall not be placed in dedicated facilities, units, or wings solely based on this identification or status, unless the placement is in a dedicated unit wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting these offenders.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard requiring the use of screening information.</p> |
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| 115.43 | Protective Custody |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interview with the following:</p> <ul style="list-style-type: none"> • Unit Safe Prisons/PREA Manager (USPPM) <p>Through the interview process the USPPM indicated there have not been any inmates placed in protective custody in the past twelve months for PREA related situations.</p> <p>Provision (a):</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 3, states offenders at elevated risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all alternatives has been made and it is determined there is no available alternative means of separation from abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregated housing while completing the assessment, for no longer than</p> |

24 hours.

The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the USPPM specific to this issue and it was confirmed there had not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates could be interviewed relative to this standard.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 6, a-c, indicates offenders placed in protective safekeeping for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the unit restricts access to programs, privileges, education, or work opportunities, the unit shall document:

- a. The opportunities that have been limited;
- b. The duration of the limitations; and
- c. The reasons for the limitations.

The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the USPPM specific to this issue and it was confirmed there have not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates could be interviewed relative to this provision.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 5, specifies Offenders shall be assigned to protective safekeeping only until an alternative means of separation from likely abusers is arranged, for no longer than 30 days.

The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard, specific to a period longer than 30-days, while awaiting alternative placement.

As stated previously, through the interview process the USPPM indicated there have not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates could be interviewed relative to this provision.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 4, a, b, mandates If a protective safekeeping housing assignment is made pursuant to Section III.C.3, the unit shall clearly document:

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| | <p>a. The basis of the concern for the offender’s safety; and</p> <p>b. The reason no alternative means of separation can be arranged.</p> <p>The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard, specific to a period longer than 30-days, while awaiting alternative placement. Consequently, no inmates could be interviewed relative to this provision.</p> <p>Provision (e)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 7, states every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the offender from the general population. During the past twelve months there have been no inmates placed into protective custody in accordance with this standard. This was confirmed via the USPPM interview. Consequently, no inmates could be interviewed relative to this provision.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard relative to protective custody.</p> |
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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017 • PREA Poster in English and Spanish <p>Observations during on-site review</p> <ul style="list-style-type: none"> • 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. <p>During the on-site portion of the audit, the Auditor observed PREA information was</p> |

painted on the walls. This information included, but was not limited to:

- The PREA hotline number
- How to contact the USPPM
- Ways to report PREA allegations
- Key elements of the PREA policy such as zero tolerance and the right to be free from retaliation were painted on the walls.

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

Interview with the following:

- Unit Safe Prisons/PREA Manager (USPPM)
- Random Staff
- Random Inmates

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

Through the interview process the inmates reported they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the hotline number, contacting the USPPM, 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 the USPPM indicated inmates could report abuse or harassment to a public or private entity. The USPPM stated inmates could report to the PREA Ombudsman, under the Texas Board of Criminal Justice (TBCJ), which is a separate entity from the TDCJ.

Through the interview progress the inmates interviewed regarding this provision, all 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 interviews with the staff, varying methods for staff to privately report sexual abuse of inmates were identified. All staff indicated they may choose to make a private report to their supervisor, another supervisor, the facility USPPM, PREA Coordinator or the OIG.

Provision (a):

Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe

Prisons/PREA Plan, February 2019, p. 20, A, 1, a, offenders shall be provided multiple internal methods to privately report sexual abuse, sexual harassment, and other acts of aggression including, but not limited to, extortion and violence. Offenders may report retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to the incidents.

Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017, p. 28, F, indicates the Safe Prisons/PREA program was established to prevent, detect, and respond to sexual abuse, sexual harassment, extortion, and other acts of violence perpetrated against an offender. The Safe Prisons/PREA Plan and policies provides guidelines necessary to prevent, respond, and investigate acts of aggression. Additionally, the plan outlines the process of addressing the needs of offenders following an allegation. One of the strategies involved in the program includes educating offenders to raise awareness regarding the program and provide direction on methods to prevent and report incidents of sexual abuse or sexual harassment.

Provision (b)

Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 20, A, 1, b, c, states offenders may report allegations directly to the major, the Office of Inspector General (OIG), or the PREA Ombudsman. Reports to the PREA ombudsman may be made confidentially and in accordance with ED-02.10, "Prison Rape Elimination Act Complaints and Inquiries." Additionally, offenders may remain anonymous upon request when reporting allegations of sexual abuse and sexual harassment to the PREA Ombudsman.

Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017, p. 28, G, 2, specifies The PREA Ombudsman is a point of contact for offenders who have complaints or inquiries regarding any allegations of sexual abuse or sexual harassment. Offenders may contact the PREA Ombudsman in writing; however, offender family members and friends may contact the PREA Ombudsman in writing or by phone. You may report allegations verbally or in writing, but keep in mind time is of the essence when reporting sexual abuse. Any delay in reporting shall make investigating an incident more challenging.

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

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 21, A, 4, specifies staff shall accept reports made verbally, in writing, anonymously, and from third parties, and shall promptly document any verbal reports. Of the inmates interviewed regarding this provision, 100% indicated they were aware of the ability to make reports of sexual abuse or sexual harassment in person and in writing.

Provision (d)

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| | <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 23, B, 2, indicates a method shall be provided for staff to privately report sexual abuse and sexual harassment of offenders. Staff shall accept reports made verbally; in writing, including by letter, Inmate Request to Official (I-60), sick call form, or a grievance submitted through the grievance process; anonymously; and from third parties. All verbal reports shall be promptly documented.</p> <p>The PAQ states staff may report anonymously to the Office of Inspector General and to the PREA Ombudsman. They can also file a complaint directly in writing to the Office of the Inspector General. They can also report it directly to the USPPM at their respective facilities.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility exceeds the standard relative to inmate reporting.</p> |
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| 115.52 | Exhaustion of administrative remedies |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • PREA Coordinator, Statement of Fact dated October 26, 2022 • PREA Posters - English and Spanish • Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017 <p>Observations during on-site review</p> <p>During the tour of the facility, the Auditor evaluated several pay phones to ensure they worked. Each time the telephones functioned appropriately. The phones are checked once on each shift by an intermediate or higher-level staff member to make sure they are in working order to reach the outside support agency without difficulty.</p> <p>During the tour of the facility, the Auditor observed PREA posters and paintings on the walls throughout the facility. These posters and paintings around the facility as well as the TDCJ, I-202, Offender Orientation Handbook, dated February 2017, let inmates know they can notify the USPPM, or other staff member, of any incident of sexual abuse or sexual harassment.</p> <p>Interviews with the following:</p> |

- Random and Targeted Inmates
- Unit Safe Prisons/PREA Manager (USPPM)

During the interview process the USPPM indicated a victim advocate is made available to be present with the victim before, during and following the examination. Further advocates have a responsibility to inform any victim that some information the victim shares with them may need to be provided to facility staff. This information may be medical and/or non-medical, for purposes such as institutional security, PREA investigation, and further medical and mental health services. Additionally, the advocate conducts follow-up contacts with the victim to ensure aftercare is arranged and firmly in place.

Each inmate 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 free and confidential. Each responded they knew about an outside resource because of the PREA training and the posters around the facility. Each responded they knew some of the information they provided might be given to the facility staff.

Provision (a)

On the PAQ the facility reported it provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

- Giving inmates mailing addresses and telephone numbers (including toll-free numbers) for local, state, or national victim advocate or rape crisis organizations
- Giving inmates mailing addresses and telephone numbers
- Enable reasonable communication between inmates and these organizations in as confidential a manner as possible.

The PREA Coordinator Statement of Fact dated October 26, 2022, indicates the agency/facility has made multiple attempts to obtain an agreement for a community victim advocate from a rape crisis center. However, at this time an agreement has not been established. The agency/facility continues to solicit community rape crisis organizations across the state which may be willing to establish a partnership with the agency. The effort to obtain an agreement is documented in the letters the agency sends to rape crisis centers.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.12, E, 1, specifies attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the offender with victim advocate services.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, E. 3, a, states offenders shall be provided access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The unit shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 6, defines a "Victim Advocate" as a qualified staff member from a rape crisis center or community-based organization who accompanies and supports offenders who were victims of sexual assault through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. This individual shall have completed a sexual assault training program certified by the Texas Attorney General's office and be employed by a sexual assault program or provide services through a sexual assault program as a volunteer under the supervision of an advocate.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, a, 1-3 states attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the offender with victim advocate services.

As requested by the offender victim, the victim advocate or qualified TDCJ staff member, or qualified community-based organization staff member shall:

1. Accompany and support the victim through the forensic medical examination process and investigatory interviews;
2. Provide emotional support, crisis intervention, information, and referrals; and
3. Not delay or otherwise impede the screening or stabilization of an emergency medical condition.

Provision (b)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, E. 3, b, states offenders shall be informed, prior to giving them access, of the extent to which these communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, F, 1, specifies offender victims of sexual abuse shall 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 in accordance with CMHC policies.

Provision (c)

According to the PAQ, the agency/facility has made multiple attempts to obtain an agreement for a community victim advocate from a rape crisis center. However, at this time an agreement has not been established. The agency/facility continues to solicit community rape crisis organizations across the state which may be willing to establish a partnership with the agency.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, indicates attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the inmate with victim advocate services.

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 inmate access to outside confidential support services.

| 115.53 | Inmate access to outside confidential support services |
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| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • PREA Coordinator, Statement of Fact dated October 26, 2022 • PREA Posters - English and Spanish • Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017 <p>Observations during on-site review</p> <p>During the tour of the facility, the Auditor evaluated several pay phones to ensure they worked. Each time the telephones functioned appropriately. The phones are</p> |

checked once on each shift by an intermediate or higher-level staff member to make sure they are in working order to reach the outside support agency without difficulty.

During the tour of the facility, the Auditor observed PREA posters and paintings on the walls throughout the facility. These posters and paintings around the facility as well as the TDCJ, I-202, Offender Orientation Handbook, dated February 2017, let inmates know they can notify the USPPM, or other staff member, of any incident of sexual abuse or sexual harassment.

Interviews with the following:

- Random and Targeted Inmates
- Unit Safe Prisons/PREA Manager (USPPM)

During the interview process the USPPM indicated a victim advocate is made available to be present with the victim before, during and following the examination. Further advocates have a responsibility to inform any victim that some information the victim shares with them may need to be provided to facility staff. This information may be medical and/or non-medical, for purposes such as institutional security, PREA investigation, and further medical and mental health services. Additionally, the advocate conducts follow-up contacts with the victim to ensure aftercare is arranged and firmly in place.

Each inmate 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 free and confidential. Each responded they knew about an outside resource because of the PREA training and the posters around the facility. Each responded they knew some of the information they provided might be given to the facility staff.

Provision (a)

On the PAQ the facility reported it provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

- Giving inmates mailing addresses and telephone numbers (including toll- free numbers) for local, state, or national victim advocate or rape crisis organizations
- Giving inmates mailing addresses and telephone numbers
- Enable reasonable communication between inmates and these organizations in as confidential a manner as possible.

The PREA Coordinator Statement of Fact dated October 26, 2022, indicates the agency/facility has made multiple attempts to obtain an agreement for a community victim advocate from a rape crisis center. However, at this time an agreement has not been established. The agency/facility continues to solicit community rape crisis organizations across the state which may be willing to establish a partnership with the agency. The effort to obtain an agreement is documented in the letters the

agency sends to rape crisis centers.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.12, E, 1, specifies attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the offender with victim advocate services.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, E. 3, a, states offenders shall be provided access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The unit shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 6, defines a "Victim Advocate" as a qualified staff member from a rape crisis center or community-based organization who accompanies and supports offenders who were victims of sexual assault through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. This individual shall have completed a sexual assault training program certified by the Texas Attorney General's office and be employed by a sexual assault program or provide services through a sexual assault program as a volunteer under the supervision of an advocate.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, a, 1-3 states attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the offender with victim advocate services.

As requested by the offender victim, the victim advocate or qualified TDCJ staff member, or qualified community-based organization staff member shall:

1. Accompany and support the victim through the forensic medical examination process and investigatory interviews;
2. Provide emotional support, crisis intervention, information, and referrals; and
3. Not delay or otherwise impede the screening or stabilization of an emergency medical condition.

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| | <p>Provision (b)</p> <p>According to the PAQ the facility tells inmates the extent to which communications will be monitored and the limits of confidentiality due to mandatory reporting laws.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, E. 3, b, states offenders shall be informed, prior to giving them access, of the extent to which these communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p.13, F, 1, specifies offender victims of sexual abuse shall 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 in accordance with CMHC policies.</p> <p>Provision (c)</p> <p>According to the PAQ, the agency/facility has made multiple attempts to obtain an agreement for a community victim advocate from a rape crisis center. However, at this time an agreement has not been established. The agency/facility continues to solicit community rape crisis organizations across the state which may be willing to establish a partnership with the agency.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 12, E, 1, indicates attempts shall be made to make a victim advocate from a rape crisis center available to the offender victim first. If a rape crisis center is not able to provide the offender with victim advocate services, the unit shall make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the unit shall make available a qualified TDCJ staff member to provide the inmate with victim advocate services.</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 inmate access to outside confidential support services.</p> |
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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Material Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019
- www.tdcj.texas.gov/tbcj/prea.html

Provision (a)

On the PAQ, the facility reported there is access to third-party reporting through their agency website.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 20, IV, states an Offender Protection Investigation (OPI) may be requested by anyone who has information that an offender may need protection. This information can come from the offender in need of protection, other offenders, the offender's family, TDCJ staff, or others. An OPI shall be conducted in accordance with the procedures outlined in the SPPOM.

The TDCJ has provided access to a third-party reporting process through the Texas Board of Criminal Justice (TBCJ). Reports can be made to the PREA Ombudsman by mail, telephone contact or via email at prea.ombudsman@tdcj.texas.gov. This contact information is listed on the TDCJ website: www.tdcj.texas.gov/tbcj/prea.html.

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 third party reporting.

| 115.61 | Staff and agency reporting duties |
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| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Random Staff • Medical and Mental Health Staff • Warden • Unit Safe Prisons/PREA Manager - USPPM |

Through the interview process staff were able to articulate how they would 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 USPPM, who then notifies the investigative staff.

Through the interview process medical and mental health individuals were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each verbalized their understanding of the policy as well as their rights and responsibilities. They all articulated they were obligated to advise the victim (inmate) of the limitations of confidentiality, due to the mandatory reporting law, prior to the initiation of services.

Through the interview process the Warden and USPPM indicated they would report any abuse allegations to the appropriate agency, as required by law, as well as the USPPM and agency investigators.

Through the interview process the USPPM indicated allegations of sexual abuse and sexual harassment are reported to the USPPM and Office of Inspector General investigators.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 23, B, 1, states all staff members shall immediately report, according to TDCJ policy, any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred on a unit, whether or not it is a TDCJ facility; retaliation against offenders or staff who reported an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 23, A, 13, states staff shall not reveal any information related to a sexual abuse report to anyone other than designated supervisors or officials, and only to the extent necessary to make informed treatment, investigative, security, and management decisions.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 23, B, 4, specifies unless otherwise precluded by federal, state, or local law, and at the initiation of services, medical and mental health practitioners shall be required to report sexual abuse pursuant to Section IV.B.1 of this plan, and to inform offenders of the practitioner's duty to report, as well as the limitations of confidentiality.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 20,

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| | <p>D, 3, states in accordance with CMHC policies, medical and mental health practitioners shall obtain informed consent from offenders 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>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 23, B, 1, states all staff members shall immediately report, according to TDCJ policy, any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred on a unit, whether or not it is a TDCJ facility; retaliation against offenders or staff who reported 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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| 115.62 | Agency protection duties |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head (AH) • Warden • Random Staff <p>Interview notes of the AH indicate if he received such information, he would contact the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.</p> |

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| | <p>Through the interview process the Warden indicated immediate action to protect the victim (inmate) would be taken the victim might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. The perpetrator, if known, would be placed in segregated housing.</p> <p>Through the interview process random staff indicated if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence.</p> <p>Provision (a)</p> <p>According to the PAQ, in the past 12 months, the agency/facility determined an inmate was subject to a substantial risk of imminent sexual abuse zero times. However, if or when this does occur, the agency/facility takes immediate action.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 22, IV, A, 9 and 10, state an emergency grievance alleging substantial risk of imminent sexual abuse shall be filed and managed in accordance with the TDCJ Offender Grievance Operations Manual. When an emergency grievance is received, any portion that alleges the substantial risk of imminent sexual abuse shall be forwarded to a level of review for immediate corrective action. An initial response shall be provided within 48 hours of receipt, and a final decision rendered within five calendar days. The initial response and final decision shall document whether the offender is at substantial risk of imminent sexual abuse and the action taken. Information related to this item may be found in the TDCJ Offender Grievance Operations Manual.</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 agency protection duties.</p> |
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| 115.63 | Reporting to other confinement facilities |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> |

- Head of Agency or designee (AH)
- Warden
- PREA Coordinator (PC)
- Unit Safe Prisons/PREA Manager (USPPM)

A review of interview notes revealed the AH, PC and the USPPM all confirmed any notification received regarding a PREA incident, whether it be sexual abuse or sexual harassment or staff sexual misconduct that occurred within any TDCJ facility will be investigated in accordance with the guidelines of Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019

The AH, Warden and the USPPM all indicated once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately assigned to an Office of Inspector General investigator to conduct the investigation.

Provision (a)

According to the PAQ, in the past 12 months, the facility received zero allegations that an inmate was abused while confined in another facility.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, D, 1, states after receiving an allegation that an offender was sexually abused while confined at another facility, such as a county jail or out of state facility, the individual taking the initial report shall immediately notify the USPPM. The USPPM shall provide the SPPMO with the details of the alleged incident so the SPPMO may initiate notification to the appropriate office of the outside agency where the alleged abuse occurred.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, D, 1, a, indicates the SPPMO shall provide the notification to the appropriate agency as soon as possible, but no later than 72 hours after receiving the allegation.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, D, 1, b, indicates the SPPMO shall document the notification.

The PAQ reflects that in the past twelve months, the facility received one allegation that an inmate was abused while confined at another facility. Further the PAQ reflects that in the past twelve months the facility received one allegation of sexual abuse from other facilities.

The Auditor reviewed emails that were sent from facility to facility regarding sexual abuse allegations. Each email included the PREA Case Number. A PREA case number is assigned once the allegation is reported to the Emergency Action Center (EAC). The Auditor compared the notification with the investigative tracking sheet and was able to determine each facility followed the agency's reporting requirements as each was

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| | <p>assigned a PREA number. A review of the notifications all notifications were made within 24 hours.</p> <p>Provision (d)</p> <p>According to the PAQ in the past 12 months, there was one allegation of sexual abuse received from other facilities. This allegation was investigated in accordance with the PREA standards. The Auditor reviewed documentation of this allegation from another facility as well as the documentation of responses.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, D, 2, states any TDCJ warden or departmental office receiving notification from an outside agency that an offender in the outside agency’s custody alleged sexual abuse while assigned to TDCJ custody shall ensure the allegation is forwarded to the PREA ombudsman in accordance with ED-02.10, “Prison Rape Elimination Act Complaints and Inquiries,” for possible investigation.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding reporting to other confinement agencies.</p> |
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| 115.64 | Staff first responder duties |
| | <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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden • Custody Staff - First Responders • Non-Custody First Responders <p>During the interview process, the Warden 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</p> |

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.

During the interview process, first responders confirmed training in the PREA process through annual in-service training, on the job training, and staff meetings. The USPPM is constantly reminding them of PREA policies and speaking with them regarding the importance of PREA and sexual safety.

Through the interview process non-custody staff indicated they would notify custody staff immediately, 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. They all verbalized the importance of, as well as their understanding of, the need for confidentiality in all cases.

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 26, B, 1, a-e, states after learning of an allegation that an offender was sexually abused, the first correctional officers 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 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 twelve allegations of alleged sexual abuse in the past 12-months. In twelve of those cases, the first security staff member to respond to the report separated the alleged victim and abuser. In six of those cases staff were notified within a time frame that still allowed for the collection of physical evidence. In these six cases staff utilized the evidence collection protocols correctly.

Of these six allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, all six times the first security staff member to respond preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.

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| | <p>Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, six times the first security staff member to respond to the report requested the alleged victim and the abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating</p> <p>The Auditors review of the allegation documentation included the original complaint, the referral for investigation, referrals for mental health, and all subsequent available paperwork, including administrative remedy forms and responses where applicable. Where applicable, the inmates were given proper notice of the findings and the cases were closed.</p> <p>Provision (b)</p> <p>According to the PAQ of the allegations that an inmate was sexually abused made in the past 12 months, a non-security staff member was never the first responder.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 26, B, 2, indicates if the first staff responder is not a correctional officer, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and shall immediately notify a correctional officer</p> <p>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 scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, relay any observations to the OIC, Shift Supervisor, OIG investigator, or USPPM.</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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| 115.65 | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, |

Safe Prisons/PREA Plan, February 2019

- Texas Department of Criminal Justice, Safe Prisons/PREA Operations Manual, 05.01, Sexual Abuse Response and Investigation, dated February 2020
- Texas Department of Criminal Justice, Safe Prisons/PREA Program, Sexual Abuse Coordinated Response Plan
- Sexual Abuse Investigation Checklist /Attachment G

Interviews with the following:

- Warden
- First Responders
- Specialized Staff

Through the interview process each first responder and specialized staff member was able to articulate their required responsive actions following an alleged sexual abuse incident. Each understood and made appropriate response efforts to an alleged sexual abuse incident and had been appropriately trained to respond to such incidents.

During the interview process the Warden confirmed the coordinated response plan 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.

Provision (a)

The PAQ indicates the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 26, B, 1, a-h states after learning of an allegation that an offender was sexually abused, the first correctional officers responding to the report shall:

1. Notify a security supervisor;
2. Separate the alleged victim and assailant;
3. Preserve and protect the crime scene, if applicable, until appropriate steps can be taken to collect any evidence;
4. 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.
5. 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.

6. Refer the alleged victim and known abuser to medical and mental health services for examination and evaluation. If medical and mental health staff are not available at the time the allegation is made, staff first responders shall take preliminary steps to protect the victim and shall notify on-call medical or mental health staff. The nature and scope of treatment shall be determined by medical and mental health practitioners in accordance with CMHC policies and Section II.G of this plan.
7. As appropriate, the services of a victim advocate or an OVR shall be made available in accordance with this plan.
8. Additional information regarding coordinated response procedures may be found in the SPPOM.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 26, B, 2, states if the first staff responder is not a correctional officer, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and shall immediately notify a correctional officer.

The TDCJ has a written detailed Coordinated Response Plan. The plan is thorough and comprehensive. It contains detailed response actions for staff first responders, supervisors, medical and mental health practitioners, investigators, and facility leadership. It lists the correct forms to use, a chain of command and delegates responsibilities for each step of the process. It includes a Sexual Abuse Investigation Checklist/Attachment G to list dates and times each action was completed and the contact person with agency or department. The Auditor reviewed thirty-two Sexual Abuse Investigation Checklist/Attachment G. Each allegation was reported within the previous twelve months. A review of records show staff followed the actions outlined in the coordinated response plan.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility exceeds the standard regarding coordinated response.

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: <ul style="list-style-type: none">• Pre-Audit Questionnaire (PAQ) and supporting documentation provided.• Texas Department of Criminal Justice, Executive Directive, PD-35 (rev. 4), |

Independent Dismissal Mediation and Dispute Resolution, dated March 1, 2020

- Texas Department of Criminal Justice, Executive Directive, PD-29 (rev. 5), Sexual Misconduct with Offenders, dated March 1, 2017
- Texas Department of Criminal Justice, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019

Interviews with the following:

- Human Resources (HR)
- Random Staff

Interviews with staff revealed an understanding of the policies listed within this standard. According to HR, management does have the right to separate the inmate from a staff member who is the subject of an investigation. This separation can either be temporarily reassigning the employee or redirecting the employee.

Provision (a)

According to the PAQ the TDCJ does not engage in collective bargaining with staff. Staff are subject to the rules of conduct and other TDCJ policies mandating zero tolerance of all forms of sexual abuse and sexual harassment.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 2, Policy, Employees are representative of TDCJ and are expected to adhere to the highest standards of conduct while on-duty or off-duty, including adherence to the rules of conduct described in the Listing of Employee General Rules of Conduct and Disciplinary Violations (Attachment A) Employees who allegedly commit a rule violation will be subject to disciplinary action in accordance with the procedures within this directive.

It goes on to say, the TDCJ promotes equal employment opportunity through an employee disciplinary system designed to impose disciplinary actions without regard to race, color, religion, sex (gender), national origin, age, disability, or genetic information (collectively "protected class"). The TDCJ has zero tolerance for all forms of employment discrimination in the disciplinary process. Retaliation for opposing or reporting employment discrimination is prohibited.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 4, 1, states it is an employee's responsibility to know the rules in this directive and to seek clarification, if necessary. Being unaware of the existence of any of the rules is not a defense for violations.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 5, II, 4, states an appropriate TDCJ official may deem it in the best interest of the TDCJ or an employee

to temporarily reassign the employee to other duties to limit the employee's contact with offenders or other employees.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 7 - 8, III, A, indicates if the reprimanding authority does not reassign the employee or permit the employee to continue working in the current position, the reprimanding authority may consider, in the order listed, the following options pending completion of a pre-hearing investigation and employee hearing:

1. Involuntary use, in the order listed, of the employee's accrued compensatory than holiday time.
2. Voluntary use of overtime or vacation time (the employee shall complete a PERS 24, TDCJ Leave Request); or
3. Leave without pay in accordance with PD-49, "Leaves Other than Medical and Parental," if the employee does not have any accrued leave other than sick time or refuses to voluntarily use accrued.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 9, V, A, specifies A prehearing investigation provides the reprimanding authority with information regarding an alleged violation. Based on the information provided, the reprimanding authority determines whether an employee hearing is warranted.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 18, IX, states If the reprimanding authority determines an employee is not guilty because the violation did not occur or there were extenuating circumstances, a finding of not guilty shall be marked, along with no discipline imposed.

If the reprimanding authority determines that an employee is guilty of a violation, but extenuating circumstances justify not imposing disciplinary action, the reprimanding authority shall provide that justification at the bottom of the PERS 185.

If the reprimanding authority determines that a violation occurred, the reprimanding authority shall indicate a finding of guilty and decide whether to impose disciplinary action and the severity of the action. Disciplinary action shall be based on job-related and non-discriminatory criteria. The reprimanding authority shall consider the following factors:

1. The seriousness of the violation;
2. The employee's work history, including job performance and length of service;
3. Discipline imposed by the reprimanding authority on other employees for the same violation

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 26, XII, A, 1-4, states Pending final approval of the dismissal recommendation, the reprimanding authority

shall use the following options in the order listed:

1. Involuntary use of the employee's accrued state compensatory time, including comp time and holiday time;
2. Voluntary use of overtime or vacation time; the employee shall complete a PERS 24, TDCJ Leave Request;
3. Suspension without pay, if employee has no accrued leave other than sick time, or refuses to voluntarily use accrued overtime or vacation time; or
4. In limited circumstances, the following may be used:
 - Change to another job assignment; or
 - Administrative leave, in accordance with PD-49, "Leaves Other than Medical and Parental," in extremely unusual cases if granted by the executive director.

TDCJ, Executive Directive, PD-29 (rev. 5), Sexual Misconduct with Offenders, dated March 1, 2017, p. 1, states the TDCJ has a zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of offenders. An employee is prohibited from subjecting another employee, offender or other individual to harassment, or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with offenders.

TDCJ, Executive Directive, PD-35 (rev. 4), Independent Dismissal Mediation and Dispute Resolution, dated March 1, 2020, p. 2, 1, states an employee who has been recommended for dismissal shall be given the opportunity to have the dismissal recommendation mediated through a voluntary independent dismissal mediation session. To promote a mutually acceptable agreement, a mediator facilitates communication between a designated TDCJ official and the employee who has been recommended for dismissal.

Provision (b)

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 every provision of the standard regarding preservation of ability to protect inmates from contact with abusers.

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Material Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019

Interviews with the following:

- Warden
- Staff in Charge of Monitoring Retaliation

Through the interview process the Warden indicated that retaliation is not tolerated. The Warden emphasizes to staff and inmates that they are to speak about PREA issues freely without fear of retaliation. It is stressed that if retaliation does occur, there will be prompt action taken against those responsible for the retaliation. They would be investigated and disciplined. These sentiments were echoed by the staff in charge of monitoring retaliation.

The Warden further indicated there are multiple measures used to protect inmates and staff from retaliation. These measures include considering and monitoring if the inmate 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. The staff in charge of monitoring retaliation echoed these comments.

Provision (a)

According to the PAQ the agency has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff.

The PAQ indicates staff member(s) or charges department(s) with monitoring for possible retaliation. These individuals are the Captain/Security, the Warden/Administration and the Asst. Warden/Administration.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, C, 1, specifies offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other offenders or staff. The USPPM shall monitor for incidents of retaliation in accordance with the SPPOM.

Provision (b)

According to the PAQ the agency employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24,

C, 2, states as appropriate, multiple protective measures may be taken, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offender or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Provision (c)

According to the PAQ the agency/facility monitors, generally for a period of 90-days, the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.

According to the PAQ, the facility monitors retaliation for a period of 90 days, unless further monitoring is needed. The PAQ also indicated, the facility had zero instances of retaliation in the past twelve months.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, C, 3, indicates for at least 90 days following a report of sexual abuse, the USPPM shall monitor and document the conduct and treatment of offenders or staff who reported the sexual abuse, and of offenders who were reported to have been victims of sexual abuse, for changes that may indicate possible retaliation by offenders or staff and shall act promptly to address any retaliation.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, C, 5, states the monitoring shall also include periodic status checks of offenders.

Provision (e)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, C, 7, indicates if any other individual who cooperates with an investigation expresses a fear of retaliation, the TDCJ shall respond appropriately to protect that individual against retaliation.

Provision (f)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 24, C, 8, states if the TDCJ investigation determines the allegation to be unfounded, the monitoring shall be discontinued.

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 agency protection against retaliation.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Material Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019

Interviews with the following:

- Warden
- Classification Staff

During the interview process classification staff indicated there are multiple housing options available and therefore a sexual abuse victim is not automatically placed in segregation for his protection. Other alternatives are always explored, and segregation is utilized as a last resort. The Auditor was informed there are numerous areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregation housing. Classification and the facility's Warden stated they can transfer the abuser or victim to another TDCJ facility if need be.

Further they indicated inmates are allowed to participate in programs, education, and work while being housed in segregation for protection as a sexual abuse victim, consistent with safety and security needs.

Provision (a)

The PAQ indicates the facility has not used segregated housing in the past 12-months for PREA related allegations.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 3, states offenders at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all available alternatives has been made and it is determined there is no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregated housing while completing the assessment, for no longer than 24 hours.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 4, a-b, indicates If a protective safekeeping housing assignment is made pursuant to Section III.C.3, the unit shall clearly document:

1. The basis of the concern for the offender's safety; and
2. The reason why no alternative means of separation can be arranged.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, C, 5, states offenders shall be assigned to protective safekeeping only until an alternative means of separation from likely abusers is arranged, for no longer than 30 days.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18-19, C, 6, a-c, states offenders placed in protective safekeeping for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the unit restricts access to programs, privileges, education, or work opportunities, the unit shall document:

1. The opportunities that have been limited;
2. The duration of the limitations; and
3. The reasons for the limitations.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19, C, 7, mandates every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the offender from the general population.

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 post allegation protective custody.

| 115.71 | Criminal and administrative agency investigations |
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| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Investigative Staff • Unit Safe Prisons/PREA Manager – USPPM <p>During the interview process the investigator 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.</p> |

During the interview process the investigative staff confirmed attendance at these training sessions. The Auditor reviewed the investigators training records and verified his attendance and participation in all mandated training.

During the interview process the investigative staff indicated all investigations followed the same investigative format. He stated he interviews the victim first, then any witnesses, leaving the perpetrator for last. He stated 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, he will go to the dedicated SAFE/SANE location where the victim is being seen. Except in the cases where the SAFE/SANE team collects the evidence, the investigator indicated he collects and secures all evidence. He was trained in evidence collection. The Auditor reviewed training records, which confirmed this training.

During the interview process, the investigator reported when the quality of evidence supports a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The Office of Inspector General confirmed if the case is criminal Miranda warnings are given to the person(s)

During the interview process the investigative staff reported credibility of anyone involved in the investigation is determined through the investigative process. He stated everyone is treated as credible and truthful unless the investigation proves otherwise. He confirmed a polygraph is not used in the investigative process of PREA cases.

During the interview process the investigative staff reported in administrative investigations the evidence is followed as the investigation unfolds. In following the evidence, every attempt is made to determine if staff actions or failure to act contributed to the allegation. All findings are summarized in an investigative report.

During the interview process, the investigator indicated if the investigation uncovers evidence that a crime has been committed an affidavit is prepared for the prosecutor who will determine if charges will be filed. The full documentation of investigation by the OIG is kept within their office. The institution keeps a file with documentation that corresponds with actions within the facility, i.e.: Responder Check-off (Supervisory, Medical, Mental Health), 30-day reviews, sign-off form for offenders housing choice, etc.

During 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.

During the interview process, the investigator confirmed in the facilities cooperate with the Office of Inspector General (OIG) and the OIG endeavors to keep the facility informed of the progress of the investigation.

Provision (a)

The PAQ reflects the TDCJ has a policy related to criminal and administrative investigations.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, V, A, 4, states investigations of sexual abuse threatened sexual abuse, and sexual harassment shall be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 26, V, A, 5, indicates investigations involving allegations of sexual abuse shall be conducted by investigators who have received special training in sexual abuse investigations pursuant to this plan.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, V, A, 1, mandates all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, V, D, 2 specifies when the evidence supports criminal prosecution, OIG shall conduct compelled interviews only after consulting with prosecutors to ensure the interviews do not impede subsequent criminal prosecution.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, V, G, 3, states substantiated allegations of conduct that are criminal shall be referred for prosecution in accordance with OIG policies and procedures.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 29, V, E, 1, c, indicates the credibility of an alleged victim, assailant, or witness shall be assessed on an individual basis and not on the status as an offender or staff member.

Provision (f)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 29, V, E, 1, d, states staff shall document the description of physical and testimonial evidence in the body of the report, the reasoning behind credibility assessment, and investigative facts and findings.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 29, V, E, 1, e, specifies information regarding staff action or inaction that may have contributed to the alleged abuse shall be included in the investigative report.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, V, G, 1, a-b, outlines that administrative investigations shall:

- Include an effort to determine if staff actions or inactions contributed to the abuse; and
- Be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Provision (g)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, V, G, 2, mandates criminal investigations shall be documented in accordance with OIG policies and procedures.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, V, G, 3, states substantiated allegations of conduct that are criminal shall be referred for prosecution in accordance with OIG policies and procedures.

When asked about handling criminal investigation, the investigative staff reported he thoroughly documented all steps of the process, including investigative steps, interviews, facts, and findings, up until the point he determines it is criminal in nature. When he determines that the incident rises to the level of criminal prosecution, he will provide an affidavit to the Prosecutor who will determine if charges will be filed.

According to the PAQ, in the past twelve months there was one substantiated allegation of conduct that is criminal that was referred for prosecution.

Provision (h)

Per the PAQ, in the past twelve months there was one criminal case referred for prosecution.

Provision (i)

According to the PAQ the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, V, G, 4, mandates all administrative and criminal investigations shall be retained in accordance with the TDCJ Records Retention Schedule

Provision (j)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, V, D, 4, states the departure of the alleged assailant or victim from employment or custody of the TDCJ shall not be the basis for terminating an investigation.

Provision (k)

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| | <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 25, V, A, 3, specifies the requirements of evidence protocol and forensic medical examinations shall also apply to:</p> <ul style="list-style-type: none"> • Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and • Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails. <p>Provision (I)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 29, V, E, 1, f, states unit staff conducting OPIs shall cooperate with the OIG when applicable, to avoid interfering with possible criminal investigation related to the same incident.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding criminal and administrative agency investigations.</p> |
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| 115.72 | Evidentiary standard for administrative investigations |
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| | <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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interview with the following:</p> <ul style="list-style-type: none"> • Investigative Staff <p>Through the interview process the 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 TDCJ 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> |

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| | <p>The PAQ indicates the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, D, 5, states no standard higher than the preponderance of evidence shall be imposed in determining if 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> |
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| 115.73 | Reporting to inmates |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas Department of Criminal Justice, Safe Prisons/PREA Operations Manual, 05.10, Reporting Sexual Abuse Criminal Case Status to Offenders, dated February 2020 • Texas Department of Criminal Justice, Safe Prisons/PREA Program, SPPOM 05.05, Attachment M, UCC Notification of OPI Outcome <p>Interview with the following:</p> <ul style="list-style-type: none"> • Warden • Investigative Staff <p>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 OIG investigator sends to the Warden’s 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 inmate of the outcome of the administrative investigation.</p> <p>Provision (a)</p> <p>According to the PAQ, the facility had twelve allegations of sexual abuse and</p> |

harassment in the past twelve months. All twelve victims were notified in writing of the results of the investigation. Documentation of these notifications was reviewed while onsite.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 30, F, 4, states following an OPI committee review, the committee shall inform the offender if the allegations were determined to be substantiated, unsubstantiated, or unfounded.

TDCJ, Safe Prisons/PREA Program, SPPOM 05.05, Attachment M, UCC Notification of OPI Outcome, is the form used to notify the offender.

Provision (b)

According to the PAQ there was one alleged inmate sexual abuse in the facility that was completed by an outside agency in the past 12 months. This inmate was notified verbally or in writing of the results of the investigation.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, C, 7, states the TDCJ SPPM shall ensure the relevant criminal information is received from the OIG to inform the offender.

TDCJ, Safe Prisons/PREA Operations Manual, 05.10, Reporting Sexual Abuse Criminal Case Status to Offenders, dated February 2020 documents the policy and procedure for reporting final disposition and criminal case status to offenders following receipt of the Office of Inspector General (OIG) criminal closure report.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 27, C, 3, states offenders shall be notified of relevant information regarding criminal investigations, in accordance with the SPPOM.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 27, C, 5, states if an offender is determined to have been a victim of staff-on-offender sexual abuse, the warden shall inform the offender when:

- The staff member is no longer assigned to the offender's unit; or
- The staff member is no longer employed by the TDCJ.

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

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 27-28, C, 6, a-b, states if an offender alleges to have been a victim of offender-on-offender sexual abuse, the SPPMO will subsequently inform the alleged victim when:

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| | <ul style="list-style-type: none"> • The alleged assailant has been indicted on a charge related to sexual abuse within the unit; or • The alleged assailant has been convicted on a charge related to sexual abuse within the unit. <p>Provision (e)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 28, C, 9, states the requirement to provide offender notification shall terminate if the offender is released from the custody of the TDCJ.</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 inmates.</p> |
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| 115.76 | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas department of Criminal Justice, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden • Unit Safe Prisons/PREA Manager (USPPM) <p>Through the interview process the Warden confirmed during the previous twelve months there had not been any terminations or resignations of staff for violation of the agency's sexual abuse or sexual harassment or sexual misconduct policies. The USPPM echoed this information.</p> |

Provision (a)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 6, states disciplinary actions related to staff-on-offender sexual abuse or sexual harassment violations shall be handled in accordance with PD- 22, "General Rules of Conduct and Disciplinary Action Guidelines for Employees."

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 4, I, states it is an employee's responsibility to know the rules in this directive and to seek clarification, if necessary. Being unaware of the existence of any of the rules is not a defense against violations.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 5, II, A, states, when possible, supervisors are expected to take actions to correct an employee's unacceptable behavior before pursuing disciplinary action. Supervisors shall ensure these actions are objective, job-related, and used in a consistent manner. If the corrective action does not result in the necessary change in conduct, the supervisor may proceed with disciplinary action in accordance with the procedures in this directive.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 5, II, B, 4, a-c, an appropriate TDCJ official may deem it in the best interest of the TDCJ or an employee to temporarily reassign the employee to other duties in order to limit the employee's contact with offenders or other employees; for example, pending the completion of an EEO investigation. The reassignment will consist of one of the following options in the order listed:

- Assigning the employee to work a non-contact position in the unit or department;
- Coordinating with the regional or assistant director or higher level of authority to temporarily move the employee to another unit or department; or
- Contacting the human resources director for placement assistance

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 7, III, A, if the reprimanding authority does not reassign the employee or permit the employee to continue working in the current position, the reprimanding authority may consider, in the order listed, the following options pending completion of a prehearing investigation and employee hearing:

1. Involuntary use, in the order listed, of the employee's accrued compensatory then holiday time;
2. Voluntary use of overtime or vacation time (the employee shall complete a PERS 24, TDCJ Leave Request); or

3. Leave without pay in accordance with PD-49, "Leaves Other than Medical and Parental," if the employee does not have any accrued leave other than sick time or refuses to voluntarily use accrued overtime or vacation time.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 9, V, A, indicates a prehearing investigation provides the reprimanding authority with information regarding an alleged violation. Based on the information provided, the reprimanding authority determines whether an employee hearing is warranted.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 18, IX, if the reprimanding authority determines an employee is not guilty because the violation did not occur or there were extenuating circumstances, a finding of not guilty shall be marked, along with no discipline imposed.

Additionally, if the reprimanding authority determines that an employee is guilty of a violation, but extenuating circumstances justify not imposing disciplinary action, the reprimanding authority shall provide that justification at the bottom of the PERS 185.

Lastly, if the reprimanding authority determines that a violation occurred, the reprimanding authority shall indicate a finding of guilt and decide whether to impose disciplinary action and the severity of the action. Disciplinary action shall be based on job-related and non-discriminatory criteria.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 25, XI, D, states dismissal is the most severe disciplinary action.

1. If the violation is an EEO rule violation, the appropriate EEO-DAO approves the dismissal after the dismissal recommendation review process is completed.
2. If the violation is a non-EEO rule violation, the reprimanding authority may recommend dismissal; however, only the executive director, deputy executive director or the appropriate division director may approve the dismissal.
3. The reprimanding authority shall document a dismissal recommendation on the PERS 185 and PERS 186, Dismissal Recommendation and Action form (Attachment K), then attach the PERS 185 to the PERS 186.
4. The reprimanding authority shall not recommend alternate disciplinary actions in the event the dismissal recommendation is not approved. Alternate punishment, if any, shall be determined by the division director and coordinated through the disciplinary specialist.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 26, XII, A, 1-4, specifies pending final approval of the dismissal recommendation, the reprimanding authority shall use the following options in the order listed:

1. Involuntary use of the employee's accrued state compensatory time, including comp time and holiday time;
2. Voluntary use of overtime or vacation time; the employee shall complete a PERS 24, TDCJ Leave Request;
3. Suspension without pay, if employee has no accrued leave other than sick time, or refuses to voluntarily use accrued overtime or vacation time; or
4. In limited circumstances, the following may be used:
 - Change to another job assignment; or
 - Administrative leave, in accordance with PD-49, "Leaves Other than Medical and Parental," in extremely unusual cases if granted by the executive director.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 41, Attachment A, 21, states discrimination or harassment based on race, color, religion, sex (gender), including sexual harassment, national origin, age (40 or above), disability, or genetic information is prohibited. In addition, an employee shall not retaliate against an employee or other individual who filed a charge of, participated in a proceeding regarding, or otherwise opposed an alleged EEO rule violation, or associated with the applicant, employee, or other individual who is involved in such activity. Examples of adverse employment actions that may be retaliation for purposes of this rule are identified in PD-13, "Sexual Harassment and Discourteous Conduct of a Sexual Nature" and PD-31, "Discrimination in the Workplace."

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 42, Attachment A, 22, states an employee shall not harass or retaliate against another individual in any form or for any reason.

TDCJ, Executive Directive, PD-22 (rev. 16), General Rules of Conduct and Disciplinary Action Guidelines for Employees, dated November 1, 2019, p. 48, Attachment A, 42d, states an employee shall not commit acts of sexual misconduct with: (1) any incarcerated offender; or (2) any offender under the supervision of the TDCJ who the employee's spouse is not. Acts of sexual abuse and harassment are described in PD-29, "Sexual Misconduct with Offenders."

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39, VII, A, 5, termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39, VIII, A, 6, indicates disciplinary sanctions for violations of TDCJ policies relating to sexual abuse or sexual harassment, that do not involve actual sexual abuse, shall be commensurate with the nature and circumstances of the acts committed, the staff

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| | <p>member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>Provision (d)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39, VIII, A, 7, specifies all terminations for violations of TDCJ sexual abuse or sexual harassment policies, or resignations in lieu of termination, shall be reported to the OIG, unless the activity was clearly not criminal, and to any relevant licensing bodies.</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 staff.</p> |
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| 115.77 | Corrective action for contractors and volunteers |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interview with the following</p> <ul style="list-style-type: none"> • Warden <p>During the interview process the Warden disclosed when an issue is brought to his attention, he immediately refers the matter to the OIG for follow-up. During this time, the contractor or volunteer are not allowed access to the facility pending investigation and review of the matter.</p> <p>Provision (a)</p> <p>The PAQ indicates there have been zero contractors or volunteers who have been reported to licensing bodies or law enforcement during the past twelve months.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 39 B, 1, states any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to applicable law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> |

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| | <p>Provision (b)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 40, B, 2, the unit shall take appropriate remedial measures and shall consider whether to prohibit further contact with offenders, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. There have been zero cases of violations involving the agency's sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>During the past twelve months there have been zero reports of sexual abuse by contractors or volunteers, and thus no instances requiring remedial measures.</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 corrective action for contractors and volunteers.</p> |
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| 115.78 | Disciplinary sanctions for inmates |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 • Texas Department of Criminal Justice, I-202, Offender Orientation Handbook, dated February 2017 <p>Interview with the following</p> <ul style="list-style-type: none"> • Warden • Medical Staff <p>During the interview with the Warden, disciplinary sanctions were discussed. The Warden indicated the following:</p> <ol style="list-style-type: none"> 1. Inmate discipline is based on the level of the violation. Penalties are imposed comparable to other inmate's penalties for a similar level violation. Penalties |

might include change of housing assignment, loss of good time credit, and possible prosecution, when appropriate.

2. If the inmate has a mental history, mental health staff will be involved to assist in determining appropriate sanctions.
3. In the past twelve months there had not been any disciplinary action taken against any inmate(s) for a report of sexual abuse made in good faith.

During the interview process medical staff can make recommendations for referrals for inmates for therapy, counseling, or other interventions to address underlying issues related to abuse. The inmate's issues would be addressed during regular counseling sessions or group counseling sessions. However participation in interventions is not a condition for access to other programming or benefits.

Provision (a)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 1, mandates offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse, sexual harassment, extortion, substantiated acts of violence, or following a criminal finding of guilt for offender-on-offender sexual abuse in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders.

Provision (b)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 2, 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)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 3, states the disciplinary process shall consider whether an offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

Provision (d)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 4, indicates if the unit offers therapy, counseling, or other interventions designed

to address and correct possible underlying reasons or motivations for the abuse, consideration shall be made to determine if participation should be a requirement for access to programming or other benefits.

Provision (e)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 5, states an offender may be disciplined for sexual contact with staff only if it is determined the staff member did not consent to the contact.

Provision (f)

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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 31, H, 8, states a report of sexual abuse made in good faith, based on 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. When the preponderance of evidence exists supporting a false allegation, the offender involved in the false allegation shall be disciplined in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders.

Provision (g)

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

TDCJ, I-202, Offender Orientation Handbook, dated February 2017, p. 26, C, 1, a-d, states sexual abuse (offender-on-offender) includes any of the following acts performed on an offender by another offender, 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:

- Contact between the penis and vulva or the penis and anus, including penetration, however slight;
- Contact between the mouth and the penis, vulva, or anus;
- Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instruments; and
- 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 that was incidental to a physical altercation.

Conclusion:

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

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| | determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for inmates. |
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| 115.81 | Medical and mental health screenings; history of sexual abuse |
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| | <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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interview with the following</p> <ul style="list-style-type: none"> • Medical and Mental Health Staff • Intake Staff <p>Through the interview process, intake staff as well as medical and mental health staff indicated inmates are offered a follow-up meeting with a mental health professional, within 14-days of intake, if the intake screening indicates the inmate is at high risk for possible victimization, aggressiveness or has a history of victimization.</p> <p>Through the interview process staff who conduct intake screenings confirmed all medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.</p> <p>Provision (a)</p> <p>The PAQ reflects in the past twelve months, 112 inmates disclosed prior victimization during screening and 100% were offered a follow-up meeting with a medical or mental health professional. These records are located in the facility Medical Department in the inmate electronic medical record.</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 17, B, 6, requires if the screening pursuant to this section indicates an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>During the documentation review, the Auditor discovered all mental health referrals, because of disclosure during intake, were timely made. All referrals were evaluated</p> |

within the appropriate time frame.

Provision (b)

The PAQ reflects in the past twelve months, 100% of inmates with previous perpetrator behavior were referred for follow-up screening. These records are located in the facility Medical Department in the inmate electronic medical record.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 18, B, 7, requires if the screening pursuant to this section indicates an offender has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the offender is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 17, B, 6, states if the screening pursuant to this section indicates an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Provision (d)

The PAQ indicates the facility strictly limits information obtained in intake screening relating to sexual abuse to those who need to make management, security, or treatment plan decisions.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 19-20, D, 2, specifies any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, assisting with making treatment plans and informed management decisions, including those related to housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

Provision (e)

The PAQ indicates medical and mental health professionals obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 20, D, 3, states in accordance with CMHC policies, medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

Conclusion:

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

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| | determined the agency/facility meets every provision of the standard regarding medical and mental health screenings, history of sexual abuse. |
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| 115.82 | Access to emergency medical and mental health services |
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| | <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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interview with the following</p> <ul style="list-style-type: none"> • Medical Staff <p>Through the interview process medical and mental health staff reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.</p> <p>Through the interview process, medical staff reported that upon arriving at medical after a report of sexual assault, an inmate will get a cursory examination by the physician to provide feedback for use of SART or if the inmate should be immediately transported to a hospital due to the nature of his injuries. If the SART is utilized, before leaving the facility, the nurse will provide ‘recommendations’ for treatment and care. The facility physician will complete the orders. As part of the process, the inmate receives information about sexually transmitted infection prophylaxis and other necessary care information.</p> <p>Provision (a)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 13, F, 1, states offender victims of sexual abuse shall 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 in accordance with CMHC policies.</p> <p>The Auditor reviewed records of inmates who alleged sexual abuse and in each case the inmate was referred to medical and mental health within the appropriate time frame.</p> |

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| | <p>Provision (b)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 13, F, 2, states if no qualified medical or mental health practitioners are on duty at the time a report of abuse is made, staff first responders shall take preliminary steps to protect the victim and immediately notify the appropriate on-call medical and mental health practitioners.</p> <p>Provision (c)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 13, F, 3, indicates offenders who become victims of sexual abuse while incarcerated shall be offered timely information about and access to emergency contraception and sexually transmitted infections prophylaxis, according to professionally accepted standards of care, where medically appropriate, in accordance with CMHC policies</p> <p>As previously cited in provision (b) medical and mental health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and Mental Health staff work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.</p> <p>Provision (d)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 13, F, 4, mandates treatment services shall be provided to the offender victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from 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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| 115.83 | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, |

Safe Prisons/PREA Plan, February 2019

- Correctional Managed Health Care Policy Manual, Sexual Assault/Sexual Abuse, G-57.1, dated August 28, 2019
- Correctional Managed Health Care Policy Manual, Continuity of Care, E-44.1, dated October 13, 2011

Interview with the following

- Medical and Mental Health Staff
- Unit Safe Prison/PREA Manager (USPPM)

During the interview process medical and mental health staff indicated treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Further medical and mental health staff support compliance in evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff indicates an active understanding of the importance of appropriate evaluation, follow-up, treatment planning and service referral.

During the interview process, the USPPM 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)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 1, states all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile unit shall be offered medical and mental health evaluation and treatment, as appropriate.

Correctional Managed Health Care Policy Manual, Sexual Assault/Sexual Abuse, G-57.1, dated August 28, 2019, I, states all offenders who present with complaints of sexual assault/abuse will be immediately evaluated, examined, and appropriately referred for required services. A physical examination should be performed in all cases of sexual assault, regardless of the length of time which may have elapsed between the time of assault and the examination.

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 inmates regardless of whether the abuser is named or whether the inmate 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

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 2, indicates the evaluation and treatment of such offender victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in other units in accordance with CMHC policies or their release from custody.

Correctional Managed Health Care Policy Manual, Continuity of Care, E-44.1, dated October 13, 2011, II, mandates all health care encounters are recorded in the health record including specialty clinic visits and discharge summaries from inpatient admissions.

Correctional Managed Health Care Policy Manual, Continuity of Care, E-44.1, dated October 13, 2011, III, mandates upon the offender's arrival at a new facility, designated medical personnel will review the health record. Appropriate steps are taken to ensure that prescribed medications and/or treatment is continued pending evaluation by a clinician.

Correctional Managed Health Care Policy Manual, Continuity of Care, E-44.1, dated October 13, 2011, V, mandates Mental Health Services will initiate temporary court commitment procedures based on the anticipated needs of individual patients and the least restrictive psychiatric treatment alternatives available at the time they must be released from TDCJ.

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 inmates. Follow-up consisted of routine inmate visits with medical and mental health staff.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 3, specifies offender victims shall be provided medical and mental health services consistent with the community level of care.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 4, states offenders 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)

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| | <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 4, states offenders 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.</p> <p>Provision (f)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 5, states offenders who become victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate and in accordance with CMHC policies.</p> <p>Provision (g)</p> <p>During the interview process, the USPPM confirmed 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.</p> <p>Provision (h)</p> <p>TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 14, G, 6, mandates a mental health evaluation of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse and treatment shall be offered when deemed appropriate in accordance with CMHC policies.</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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| 115.86 | Sexual abuse incident reviews |
| | 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. • Texas Department of Criminal Justice (TDCJ), Correctional Institution Division, Safe Prisons/PREA Plan, February 2019 <p>Interviews with the following:</p> |

- Warden
- Unit Safe Prison/PREA Manager (USPPM)
- Incident Review Team (IRT)

During the interview process the Warden acknowledged the composition of the review team and the facilities commitment to consider and incorporated recommendations from team members.

During the interview process the Incident Review Team Roster confirms the make-up of the Incident Review Teams is consistent with the requirements of this standard.

Members of the Sexual Abuse Incident Review Team were interviewed. Each team member reported the team considers all criteria listed in the standard, as required by PREA policy. The report from the Sexual Abuse Incident Review team is submitted to the Warden and the USPPM.

During the interview process the USPPM indicated the report from the Sexual Abuse Incident Review team is submitted to the USPPM and the Warden.

Provision (a)

The PAQ reflects in the past twelve months there were eleven criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, I, 1, indicates an administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined to be unfounded. The unit warden shall obtain input from the security supervisors, investigators, and medical or mental health practitioners when completing the review.

Provision (b)

The PAQ reflects in the past twelve months, there were eleven criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, I, 1 state an administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined to be unfounded.

The unit warden shall obtain input from the security supervisors, investigators, and medical or mental health practitioners when completing the review.

TDCJ, Incident Review Team Roster, dated February 27, 2020, confirms the make-up of the Incident Review Teams is consistent with the requirements of this standard.

Provision (c)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, I, 1 state an administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined to be unfounded. The warden shall obtain input from the security supervisors, investigators, and medical or mental health practitioners when completing the review.

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, I, 3, states the review team shall include upper-level management, with input from line supervisors, investigators, and medical or mental health practitioners.

Provision (d)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, V, I, 1-4 states:

1. An administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined unfounded. The unit warden shall obtain input from security supervisors, investigators, and medical or mental health practitioners when completing the review.

2. The review shall be conducted in accordance with AD-02.15, "Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents."

3. The review team shall include upper-level management, with input from line supervisors, investigators, and medical and/or mental health practitioners.

4. The unit shall implement recommendations that result from the review or document the reasons for not doing so.

Provision (e)

TDCJ, Correctional Institution Division, Safe Prisons/PREA Plan, February 2019, p. 32, V, states: the review team shall include upper-level management, with input from line supervisors, investigators, and medical or mental health practitioners; and the unit shall implement recommendations that result from the review or document the reasons for not doing so. Approval for any improvements must receive approval from the TDCJ.

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 sexual abuse incident reviews.

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| 115.87 | Data collection |
| | Auditor Overall Determination: Audited at Agency Level |

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| | Auditor Discussion |
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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Material Reviewed:</p> <ul style="list-style-type: none"> • Texas Department of Criminal Justice publicly accessible website: http://www.tdcj.texas.gov/tbcj/prea.html <p>Interview with the following</p> <ul style="list-style-type: none"> • Agency Head (AH) • PREA Coordinator (PC) • Inmates <p>Through the interview process the AH indicated each facility within the TDCJ had been audited within the previous three (3) year audit cycle (2019 - 2022).</p> <p>Through the interview process the PC indicated the current audit is in the first year of the new three-year audit cycle.</p> <p>Through the interview process the inmates 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> |

Provision (a)

The AH reported each facility within the TDCJ had been audited within the previous three (3) year audit cycle (2016 - 2019).

The current audit cycle is 2022 - 2025. Copies of all audit reports are on the TDCJ website for public information and review. TDCJ PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: https://www.tdcj.texas.gov/divisions/arm/rev_stan_prea.html

Provision (b)

During an interview with the PC, the Auditor learned the current audit is in the first year of the new three-year audit cycle. TDCJ webpage provides multiple reports 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)

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 Unit Safe Prison PREA Manager, a Lieutenant and the Regional TDCJ PREA Compliance Manager were available to accompany the auditor and give her complete access to any part of the facility she requested to see.

Provision (i)

At all times throughout the audit process, TDCJ and the facility provided the Auditor with requested information in a timely and complete manner.

Provision (j)

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| | <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 with a secure, private space to conduct all interviews during the on-site portion of the audit.</p> <p>Provision (n)</p> <p>Through the interview process the inmates 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 every provision of the standard regarding frequency and scope of audits.</p> |
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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| Appendix: Provision Findings | | |
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| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
| | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | yes |
| | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) | yes |
| 115.12 (a) | Contracting with other entities for the confinement of inmates | |
| | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| 115.12 (b) | Contracting with other entities for the confinement of inmates | |
| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| 115.13 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional | yes |

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

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

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

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| | genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | |
| | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? | yes |
| 115.15 (e) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? | yes |
| | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, 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 |
| 115.15 (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 inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? | yes |

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

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| | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? | yes |
| | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? | yes |
| 115.16 (c) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| 115.17 (a) | Hiring and promotion decisions | |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to | yes |

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| | consent or refuse? | |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| 115.17 (b) Hiring and promotion decisions | | |
| | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? | yes |
| | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? | yes |
| 115.17 (c) Hiring and promotion decisions | | |
| | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check? | yes |
| | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| 115.17 (d) Hiring and promotion decisions | | |
| | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? | yes |
| 115.17 (e) Hiring and promotion decisions | | |
| | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? | yes |
| 115.17 (f) Hiring and promotion decisions | | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes |
| | Does the agency ask all applicants and employees who may have | yes |

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| | contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes |
| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |
| 115.17 (h) | Hiring and promotion decisions | |
| | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) | yes |
| 115.18 (a) | Upgrades to facilities and technologies | |
| | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | na |
| 115.18 (b) | Upgrades to facilities and technologies | |
| | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) | na |
| 115.21 (a) | Evidence protocol and forensic medical examinations | |
| | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the | yes |

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| | agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | |
| 115.21 (b) | Evidence protocol and forensic medical examinations | |
| | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| 115.21 (c) | Evidence protocol and forensic medical examinations | |
| | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? | yes |
| | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? | yes |
| | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? | yes |
| | Has the agency documented its efforts to provide SAFEs or SANEs? | yes |
| 115.21 (d) | Evidence protocol and forensic medical examinations | |
| | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? | yes |
| | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.) | yes |

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| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |
| 115.21 (e) | Evidence protocol and forensic medical examinations | |
| | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? | yes |
| | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? | yes |
| 115.21 (f) | Evidence protocol and forensic medical examinations | |
| | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) | yes |
| 115.21 (h) | Evidence protocol and forensic medical examinations | |
| | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| 115.22 (a) | Policies to ensure referrals of allegations for investigations | |
| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? | yes |
| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? | yes |
| 115.22 (b) | Policies to ensure referrals of allegations for investigations | |
| | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? | yes |

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| | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? | yes |
| | Does the agency document all such referrals? | yes |
| 115.22 (c) | Policies to ensure referrals of allegations for investigations | |
| | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) | yes |
| 115.31 (a) | Employee training | |
| | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? | yes |
| | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? | yes |
| | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? | yes |
| | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |

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| | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |
| 115.31 (b) | Employee training | |
| | Is such training tailored to the gender of the inmates at the employee's facility? | yes |
| | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? | yes |
| 115.31 (c) | Employee training | |
| | Have all current employees who may have contact with inmates 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, does the agency provide refresher information on current sexual abuse and sexual harassment policies? | yes |
| 115.31 (d) | Employee training | |
| | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? | yes |
| 115.32 (a) | Volunteer and contractor training | |
| | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? | yes |
| 115.32 (b) | Volunteer and contractor training | |
| | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| 115.32 (c) | Volunteer and contractor training | |

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| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |
| 115.33 (a) | Inmate education | |
| | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? | yes |
| | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? | yes |
| 115.33 (b) | Inmate education | |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? | yes |
| 115.33 (c) | Inmate education | |
| | Have all inmates received the comprehensive education referenced in 115.33(b)? | yes |
| | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? | yes |
| 115.33 (d) | Inmate education | |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? | yes |

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| | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? | yes |
| 115.33 (e) | Inmate education | |
| | Does the agency maintain documentation of inmate participation in these education sessions? | yes |
| 115.33 (f) | Inmate education | |
| | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? | yes |
| 115.34 (a) | Specialized training: Investigations | |
| | In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.34 (b) | Specialized training: Investigations | |
| | Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| | Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.34 (c) | Specialized training: Investigations | |

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| | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.35 (a) Specialized training: Medical and mental health care | | |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| 115.35 (b) Specialized training: Medical and mental health care | | |
| | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) | na |
| 115.35 (c) Specialized training: Medical and mental health care | | |
| | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental | yes |

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| | health care practitioners who work regularly in its facilities.) | |
| 115.35 (d) | Specialized training: Medical and mental health care | |
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) | yes |
| | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |
| 115.41 (d) | Screening for risk of victimization and abusiveness | |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following | yes |

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| | criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? | |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate 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 inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? | no |
| 115.41 (e) | Screening for risk of victimization and abusiveness | |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse? | yes |
| 115.41 (f) | Screening for risk of victimization and abusiveness | |

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| | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| 115.41 (g) Screening for risk of victimization and abusiveness | | |
| | Does the facility reassess an inmate's risk level when warranted due to a referral? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a request? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |
| 115.41 (h) Screening for risk of victimization and abusiveness | | |
| | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? | yes |
| 115.41 (i) Screening for risk of victimization and abusiveness | | |
| | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? | yes |
| 115.42 (a) Use of screening information | | |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of | yes |

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| | being sexually abusive, to inform: Work Assignments? | |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? | yes |
| 115.42 (b) | Use of screening information | |
| | Does the agency make individualized determinations about how to ensure the safety of each inmate? | yes |
| 115.42 (c) | Use of screening information | |
| | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
| | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? | yes |
| 115.42 (d) | Use of screening information | |
| | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? | yes |
| 115.42 (e) | Use of screening information | |
| | Are each transgender or intersex inmate'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 |
| 115.42 (f) | Use of screening information | |
| | Are transgender and intersex inmates given the opportunity to | yes |

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| | shower separately from other inmates? | |
| 115.42 (g) | Use of screening information | |
| | 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 inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates 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 inmates 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 inmates, does the agency always refrain from placing: transgender inmates 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 inmates 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 inmates, does the agency always refrain from placing: intersex inmates 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 inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| 115.43 (a) | Protective Custody | |
| | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
| | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? | yes |
| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they | yes |

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| | are at high risk of sexual victimization have access to: Programs to the extent possible? | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| 115.43 (c) | Protective Custody | |
| | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? | yes |
| | Does such an assignment not ordinarily exceed a period of 30 days? | yes |
| 115.43 (d) | Protective Custody | |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? | yes |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation | yes |

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| | can be arranged? | |
| 115.43 (e) | Protective Custody | |
| | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| 115.51 (a) | Inmate reporting | |
| | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |
| 115.51 (b) | Inmate reporting | |
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the inmate to remain anonymous upon request? | yes |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.) | na |
| 115.51 (c) | Inmate reporting | |
| | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? | yes |
| | Does staff promptly document any verbal reports of sexual abuse and sexual harassment? | yes |
| 115.51 (d) | Inmate reporting | |

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| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? | yes |
| 115.52 (a) | Exhaustion of administrative remedies | |
| | Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | no |
| 115.52 (b) | Exhaustion of administrative remedies | |
| | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) | yes |
| | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (c) | Exhaustion of administrative remedies | |
| | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (d) | Exhaustion of administrative remedies | |
| | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) | yes |
| | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, | yes |

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| | does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) | |
| | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (e) | Exhaustion of administrative remedies | |
| | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
| | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (f) | Exhaustion of administrative remedies | |
| | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). | yes |
| | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) | yes |
| | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? | yes |

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| | (N/A if agency is exempt from this standard.) | |
| | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (g) | Exhaustion of administrative remedies | |
| | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) | yes |
| 115.53 (a) | Inmate access to outside confidential support services | |
| | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? | yes |
| | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | na |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |
| 115.53 (b) | Inmate access to outside confidential support services | |
| | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? | yes |
| 115.53 (c) | Inmate access to outside confidential support services | |
| | Does the agency maintain or attempt to enter into memoranda of | yes |

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| | understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? | |
| | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? | yes |
| 115.54 (a) | Third-party reporting | |
| | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? | yes |
| | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? | yes |
| 115.61 (a) | Staff and agency reporting duties | |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? | yes |
| 115.61 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| 115.61 (c) | Staff and agency reporting duties | |
| | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? | yes |
| | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of | yes |

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| | confidentiality, at the initiation of services? | |
| 115.61 (d) | Staff and agency reporting duties | |
| | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? | yes |
| 115.61 (e) | Staff and agency reporting duties | |
| | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? | yes |
| 115.62 (a) | Agency protection duties | |
| | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? | yes |
| 115.63 (a) | Reporting to other confinement facilities | |
| | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? | yes |
| 115.63 (b) | Reporting to other confinement facilities | |
| | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? | yes |
| 115.63 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |
| 115.63 (d) | Reporting to other confinement facilities | |
| | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? | yes |
| 115.64 (a) | Staff first responder duties | |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report | yes |

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| | required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? | |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| 115.64 (b) | Staff first responder duties | |
| | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? | yes |
| 115.65 (a) | Coordinated response | |
| | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? | yes |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate | yes |

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| | with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |
| 115.67 (c) | Agency protection against retaliation | |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? | yes |

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| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? | yes |
| | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? | yes |
| 115.67 (d) | Agency protection against retaliation | |
| | In the case of inmates, does such monitoring also include periodic status checks? | yes |
| 115.67 (e) | Agency protection against retaliation | |
| | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? | yes |
| 115.68 (a) | Post-allegation protective custody | |
| | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? | yes |
| 115.71 (a) | Criminal and administrative agency investigations | |
| | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| 115.71 (b) | Criminal and administrative agency investigations | |
| | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? | yes |
| 115.71 (c) | Criminal and administrative agency investigations | |
| | Do investigators gather and preserve direct and circumstantial | yes |

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| | 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 |
| 115.71 (d) | Criminal and administrative agency investigations | |
| | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |
| 115.71 (e) | Criminal and administrative agency investigations | |
| | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? | yes |
| | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | yes |
| 115.71 (f) | Criminal and administrative agency investigations | |
| | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? | yes |
| | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? | yes |
| 115.71 (g) | Criminal and administrative agency investigations | |
| | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? | yes |
| 115.71 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |
| 115.71 (i) | Criminal and administrative agency investigations | |

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| | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? | yes |
| 115.71 (j) | Criminal and administrative agency investigations | |
| | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? | yes |
| 115.71 (l) | Criminal and administrative agency investigations | |
| | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.72 (a) | Evidentiary standard for administrative investigations | |
| | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? | yes |
| 115.73 (a) | Reporting to inmates | |
| | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes |
| 115.73 (b) | Reporting to inmates | |
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | yes |
| 115.73 (c) | Reporting to inmates | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes |
| | Following an inmate's allegation that a staff member has | yes |

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| | 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? | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? | yes |
| | Following an inmate's allegation that a staff member has 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 |
| 115.73 (d) Reporting to inmates | | |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? | yes |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (e) Reporting to inmates | | |
| | Does the agency document all such notifications or attempted notifications? | yes |
| 115.76 (a) Disciplinary sanctions for staff | | |
| | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? | yes |
| 115.76 (b) Disciplinary sanctions for staff | | |
| | Is termination the presumptive disciplinary sanction for staff who | yes |

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| | have engaged in sexual abuse? | |
| 115.76 (c) | Disciplinary sanctions for staff | |
| | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| 115.76 (d) | Disciplinary sanctions for staff | |
| | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law 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 |
| 115.77 (a) | Corrective action for contractors and volunteers | |
| | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? | yes |
| | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? | yes |
| | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? | yes |
| 115.77 (b) | Corrective action for contractors and volunteers | |
| | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? | yes |
| 115.78 (a) | Disciplinary sanctions for inmates | |
| | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? | yes |
| 115.78 (b) | Disciplinary sanctions for inmates | |

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| | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? | yes |
| 115.78 (c) | Disciplinary sanctions for inmates | |
| | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? | yes |
| 115.78 (d) | Disciplinary sanctions for inmates | |
| | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? | yes |
| 115.78 (e) | Disciplinary sanctions for inmates | |
| | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? | yes |
| 115.78 (f) | Disciplinary sanctions for inmates | |
| | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? | yes |
| 115.78 (g) | Disciplinary sanctions for inmates | |
| | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) | yes |
| 115.81 (a) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). | yes |
| 115.81 (b) | Medical and mental health screenings; history of sexual abuse | |

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| | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) | yes |
| 115.81 (c) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail). | na |
| 115.81 (d) | Medical and mental health screenings; history of sexual abuse | |
| | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |
| 115.81 (e) | Medical and mental health screenings; history of sexual abuse | |
| | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? | yes |
| 115.82 (a) | Access to emergency medical and mental health services | |
| | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes |
| 115.82 (b) | Access to emergency medical and mental health services | |
| | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? | yes |
| | Do security staff first responders immediately notify the appropriate medical and mental health practitioners? | yes |

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| 115.82 (c) | Access to emergency medical and mental health services | |
| | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? | yes |
| 115.82 (d) | Access to emergency medical and mental health services | |
| | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes |
| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | yes |
| 115.83 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? | yes |
| 115.83 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the facility provide such victims with medical and mental health services consistent with the community level of care? | yes |
| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na |
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If pregnancy results from the conduct described in paragraph § | na |

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| | 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | |
| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? | yes |
| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes |
| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) | yes |
| 115.86 (a) | Sexual abuse incident reviews | |
| | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? | yes |
| 115.86 (b) | Sexual abuse incident reviews | |
| | Does such review ordinarily occur within 30 days of the conclusion of the investigation? | yes |
| 115.86 (c) | Sexual abuse incident reviews | |
| | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? | yes |
| 115.86 (d) | Sexual abuse incident reviews | |

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| | 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 §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? | yes |
| 115.86 (e) | Sexual abuse incident reviews | |
| | Does the facility implement the recommendations for improvement, or document its reasons for not doing so? | yes |
| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |
| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |
| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |

| 115.401 (n) | Frequency and scope of audits | |
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| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |

PREA Agency Audit Report: Final

Name of Agency: Texas Department of Criminal Justice

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/03/2022

| 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: Marc L Coudriet | Date of Signature: 11/03/2022 |

| AUDITOR INFORMATION | |
|-------------------------------------|--------------------------|
| Auditor name: | Coudriet, Marc |
| Email: | usmc58312215@outlook.com |
| Start Date of On-Site Audit: | |
| End Date of On-Site Audit: | |

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

| Agency Chief Executive Officer Information: | | |
|--|------------------------------|--|
| Name: | Bryan Collier | |
| Email Address: | bryan.collier@tdcj.texas.gov | |
| Telephone Number: | 936-437-2101 | |

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

| SUMMARY OF AUDIT FINDINGS | |
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| <p>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.</p> <p>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.</p> | |
| Number of standards exceeded: | |
| 1 | <ul style="list-style-type: none"> 115.12 - Contracting with other entities for the confinement of inmates |
| Number of standards met: | |
| 8 | |
| Number of standards not met: | |
| 0 | |

| Standards | |
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| Auditor Overall Determination Definitions | |
| <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) | |
| Auditor Discussion Instructions | |
| <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> | |

| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.11(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Pre-Audit Questionnaire.</p> <p>TDCJ Safe Prisons/PREA Plan.</p> <p>Agency Zero Tolerance statement.</p> <p>Organizational charts, interviews, and memos.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, address the requirements of this provision. The agency mandates a zero-tolerance policy towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct. Agency policies addressed "Preventing"</p> |

sexual abuse and sexual harassment through the designation of a PREA Coordinator and PREA Compliance Manager, Criminal History Background Checks (Staff, Contractors, and Volunteers, as applicable), Training (Staff, Volunteers, and Contractors), Staffing, Intake Screening, Classification, Inmate Education, Posting of Signage (PREA Posters, etc....), and Contract Monitoring. The policies addressed "Detecting" sexual abuse and sexual harassment through Training (Staff, Volunteers, and Contractors), and Intake Screening.

The policies addressed "Responding" to allegations of sexual abuse and sexual harassment through Reporting, Investigations, Victim Services, Medical and Mental Health Services, Disciplinary Sanctions for Staff (including notification of licensing agencies), Incident Review Teams, and Data Collections and Analysis.

The Auditor noted the Inmate Handbook, PREA Posters, and PREA Brochure do address sexual abuse by another Inmate, and the Inmate Handbook does address sanctions for Inmates when involved in such conduct. Based on staff interviews it was noted TDCJ staff closely monitor for Inmate-on-Inmate sexual misconduct in accordance with PREA, allegations are reported and investigated, and inmates are held accountable.

115.11(b)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

Agency's organizational chart.

INTERVIEWS:

PREA Coordinator.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., addresses the position of the PREA Coordinator, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee Agency efforts to comply with the PREA standards in each facility.

The agency's organizational chart reflects that the PREA Coordinator position is an upper-level position and is agency-wide. The PREA Coordinator position reports to the Texas Board of Criminal Justice.

The PREA Coordinator was interviewed and reported having enough time to focus on the PREA standards from and the freedom to divert responsibilities to other staff as needed to focus on the audit.

A review of the agency policy, agency's organization chart, and based on the interview, the designated agency's PREA Coordinator, the Auditor determined the agency demonstrates it meets the requirements of this provision of this standard.

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| | <p>115.11(c)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policy ED 03.03.</p> <p>Agency's organizational chart.</p> <p>INTERVIEWS:</p> <p>PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan., addresses the position of the PREA Compliance Manager, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee Department efforts to comply with the PREA standards in each facility.</p> <p>The agency's organizational chart reflects that the Unit PREA Compliance Managers position reports to their facility Warden who reports directly to their assigned Regional Director. A review of the agency policy, agency's organization chart, and based on the interview with the PREA Coordinator, the Auditor determined the agency demonstrates it meets the requirements of this provision of this standard.</p> |
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| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>115.12(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The agency reported there were a total of thirty-four contracts for thirty-six facilities for the confinement of inmates that the agency had entered or renewed with private entities or other government agencies.</p> <p>A review of all the contracts reflected the entity's obligation to adopt and comply with the PREA standards. A review of the agency policy and the (34) contracts reflected all the contracts met the required entity's obligation to adopt and comply with the PREA standards.</p> |

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| | <p>115.12(b)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>INTERVIEWS:</p> <p>Contract Administrator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The agency reported the (34) agency-wide contracts require the agency to monitor the contractor's compliance with the PREA standards.</p> <p>The agency's Contract Administrator was interviewed and reported he is required to maintain regular contact with every inmate placed in a contracting facility. If there are concerns, agency protocol requires the inmate be removed from the facility and the facility allowed time to make corrective action and address the concerns. Corrective actions are addressed before the facility is reconsidered. Notification would also be made to law enforcement.</p> <p>The Contract Administrator stated there are contract monitors on-site that provide continuous monitoring of the contracted facility. The Contract Administrator has the authority to perform and administrative review at any sign of suspected non-compliance. A finding of non-compliance during the administrative review could result in fines, corrective action, contract termination and referral for criminal charges, if applicable.</p> <p>The Contract Administrator annually collects credentialing documentation for each facility: facility license; staff licenses or certifications; daily schedule; and monitoring reports or the licensing agency's website regarding the facility's status; and tours the facility.</p> <p>New facilities being considered for contracting purposes follow a vetting process, including reference checks with other counties, with all information being presented to the agency's leadership for review and approval. All placements involve the input of the inmate being considered for placement in the facility. The Contract Administrator reported PREA compliance results are completed and that the PREA Coordinator has implemented a tracking process for this. A review of the agency policy, agency contracts and interview with the contract administrator and PREA Coordinator demonstrated the agency exceeds the requirements of this standard.</p> |
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| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

115.17(a)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

List of background checks on current employees.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan. and a list of background checks on current employees, address this provision. Agency policy defines staff to include volunteer or contracted program services staff. The agency contractors and volunteers are all subjected to a criminal background check, including a background check. Criminal background checks for new hires and contractors are completed by HR Headquarters in Huntsville, Texas. Sampled HR files indicated timely criminal background checks. All files reflected the three required questions in this provision are included and staff affirmed by signing the form.

Recruitment files are handled and processed in HR Headquarters in Huntsville, Texas. Hiring occurs at multiple direct hire and academy sites throughout the state. The agency policies require job applicants to have background checks completed looking at any issue of prior sexual misconduct. All contractors are screened by using the same process.

The agency reported 9772 (100%) new employees/applicants background checks were made and 8 (100%) contractor background checks were completed in the past 12 months. Documentation and files were reviewed by the Auditor to confirm the process. Agency policies also require an annual re-check of all employees and contractual re-checks for contractors.

The agency policy does indicate that any employee/contractor misconduct or false reporting is subject to the possibility of termination of employment. The Administrative (Human Resources) Staff also indicated that the agency would respond to any request for information from an institutional employer seeking information on a former employee.

115.17(b)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., address this provision. The Auditor interviewed the Administrative (Human Resources) Staff. Staff reported, the agency

has incorporated and implemented the "Affirmative Duty to Disclose," which all staff were required to affirm and sign. The form provides for a "material omissions" clause.

115.17(c)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., address this provision. The agency policy requires job applicants to have background checks completed looking at any issue of prior sexual misconduct. The background checks are completed prior to any inmate contact. All contractors are screened by using the same process. The Auditor interviewed the Administrative (Human Resources) Staff.

Criminal background checks for new hires and contractors are completed by HR Headquarters in Huntsville, Texas. Additionally, reference checks are conducted by contacting prior institutional employers.

115.17(d)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

INTERVIEWS:

The Auditor interviewed the Administrative (Human Resources) Staff.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., addresses the elements of this provision. Agency policy defines staff to include volunteer or contracted program services staff. All staff are also subjected to a criminal history background check.

Criminal background checks for new hires and contractors are completed by HR Headquarters in Huntsville, Texas. Staff reported criminal background records checks are conducted on all new hires and contractors.

115.17(e)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan. and supporting documentation.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policy addresses this provision. Agency policy requires criminal history checks will be conducted annually for staff and at least every two years for contractors and volunteers. All staff are provided the opportunity to self-disclose their arrest or history prior to the agency completing the background check. Criminal background checks for new hires and contractors are completed by HR Headquarters in Huntsville, Texas.

The Auditor interviewed the Administrative (Human Resources) Staff. Staff reported, criminal background records checks are subsequently conducted on all new hires and annually for staff and at least every two years for contractors and volunteers. A review of the agency policy and HR files, and staff interview indicate the agency has conducted criminal background records checks on all staff annually and meets the provision of this standard.

115.17(f)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

HR Files.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The application process includes the "Affirmative Duty to Disclose" form, for new hires, volunteers and contractors, and a review of the HR files indicated this process was being implemented. All staff HR files reviewed indicated the forms had been signed in accordance with policy.

A review of agency policy and HR files, and staff interview, indicate the practice is in place and meets the requirements of this provision.

115.17(g)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., address this provision. Agency policy defines staff to include volunteer or contracted program services staff.

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| | <p>115.17(h)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>INTERVIEWS:</p> <p>Administrative (Human Resources) Staff.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, address this provision. The Auditor interviewed the Administrative (Human Resources) Staff.</p> <p>Staff reported if the new potential employer secures a release form from the former employee, then the information will be released. Staff reported without the release form, HR will not disclose the information.</p> |
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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.66(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency Head</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, address this provision. TDCJ employees do not participate in collective bargaining.</p> |

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| 115.87 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | 115.87(a and c) |

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan., addresses this provision.

A review of the reporting documentation reflected a comprehensive tracking system designed to maintain various elements for the required data for sexual abuse allegations as well as sexual harassment allegations.

One of the functions of the PREA Compliance Manager is to maintain this information. The tracking system contains information on all allegations of abuse, neglect and exploitation, and all serious incidents.

115.87(b)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. A review of the facility tracking information reflected a comprehensive system designed to maintain various elements for the required data for sexual abuse and sexual harassment allegations.

115.87(d)

Agency Policies and TDCJ Safe Prisons/PREA Plan.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. A review of the agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment allegations.

115.87(e)

POLICY AND DOCUMENT REVIEW:

Agency Policies and TDCJ Safe Prisons/PREA Plan.

FINDINGS:

Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision.

115.87(f)

POLICY AND DOCUMENT REVIEW:

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| | <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision.</p> |
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| 115.88 | Data review for corrective action |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.88(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>Annual report.</p> <p>INTERVIEWS:</p> <p>PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. A review of the annual report reflects all the elements required by this provision.</p> <p>Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.</p> <p>115.88(b)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision.</p> <p>115.88(c)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>Annual report.</p> <p>INTERVIEWS:</p> |

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| | <p>PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. Staff interviewed reported the Annual report is reviewed and approved by the Agency Senior Staff and posted on the agency website.</p> <p>115.88(d)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>INTERVIEWS:</p> <p>PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. Staff interviewed reported all personal identifying information and personal health information is redacted. The reports would reflect only basic demographic information.</p> |
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| 115.89 | Data storage, publication, and destruction |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.89(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>INTERVIEWS:</p> <p>PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. Staff interviewed reported access to any data is restricted to the Agency Senior Staff for operational use and is password protected.</p> <p>115.89(b)</p> <p>POLICY AND DOCUMENT REVIEW:</p> |

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| | <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The data posted on the agency website includes agency data from previous years to present.</p> <p>115.89(c)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>Aggregated data on agency website.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The data posted on the agency website has all personal identifiers redacted.</p> <p>115.89(d)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan.</p> <p>Aggregated data on agency website.</p> <p>FINDINGS:</p> <p>Agency Policies and TDCJ Safe Prisons/PREA Plan, addresses this provision. The data and records collected are to be retained in accordance with state and agency retention requirements.</p> |
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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.401(a)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The agency ensured that each facility operated by the agency, or by a private</p> |

organization on behalf of the agency, was audited at least once.

115.401(b)

POLICY AND DOCUMENT REVIEW:

Aggregated data on website.

FINDINGS:

This unit's audit is in Year 3 / Cycle 3 and the agency is working diligently on their audit cycle plan and has planned future audits. The data posted on the agency website.

115.401(h)

POLICY AND DOCUMENT REVIEW:

There is no agency policy for this provision.

FINDINGS:

The Auditor had full access to, and the ability to observe, all areas of the facility. The Auditor reviewed areas of this facility multiple times during the onsite review.

115.401(i)

POLICY AND DOCUMENT REVIEW:

There is no agency policy for this provision.

FINDINGS:

The Auditor was permitted to request and did receive copies of any relevant documents needed for this audit.

115.401(m)

POLICY AND DOCUMENT REVIEW:

There is no agency policy for this provision.

FINDINGS:

The Auditor was permitted to conduct private interviews with inmates. The staff at this facility were very professional and efficient with regards to this provision.

115.401(n)

POLICY AND DOCUMENT REVIEW:

There is no agency policy for this provision.

FINDINGS:

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| | Inmates are permitted to send confidential information or correspondence to PREA Auditors in the same manner as if they were communicating with legal counsel. |
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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.403(f)</p> <p>POLICY AND DOCUMENT REVIEW:</p> <p>There is no agency policy for this provision.</p> <p>FINDINGS:</p> <p>TDCJ, has published on its agency website all Final Audit Reports within 90 days of issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.</p> |

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

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

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| | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? | yes |
| 115.17 (f) | Hiring and promotion decisions | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | yes |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes |
| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |
| 115.17 (h) | Hiring and promotion decisions | |
| | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) | yes |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.87 (a) | Data collection | |

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| | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? | yes |
| 115.87 (b) | Data collection | |
| | Does the agency aggregate the incident-based sexual abuse data at least annually? | yes |
| 115.87 (c) | Data collection | |
| | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? | yes |
| 115.87 (d) | Data collection | |
| | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? | yes |
| 115.87 (e) | Data collection | |
| | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) | yes |
| 115.87 (f) | Data collection | |
| | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) | yes |
| 115.88 (a) | Data review for corrective action | |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, | yes |

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| | 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? | |
| 115.88 (b) | Data review for corrective action | |
| | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? | yes |
| 115.88 (c) | Data review for corrective action | |
| | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? | yes |
| 115.88 (d) | Data review for corrective action | |
| | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? | yes |
| 115.89 (a) | Data storage, publication, and destruction | |
| | Does the agency ensure that data collected pursuant to § 115.87 are securely retained? | yes |
| 115.89 (b) | Data storage, publication, and destruction | |
| | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? | yes |
| 115.89 (c) | Data storage, publication, and destruction | |
| | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? | yes |
| 115.89 (d) | Data storage, publication, and destruction | |
| | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? | yes |
| 115.401 (a) | Frequency and scope of audits | |
| | During the prior three-year audit period, did the agency ensure | yes |

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| | 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.) | |
| 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.) | no |
| | 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.) | yes |
| 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 |