

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:	Texas Department of Criminal Justice Telford Unit		
Physical address:	Barry B. Telford Unit 1899 Highway 98, New Boston, TX 75570		
Date report submitted:	01/02/2015		
Address:	American Correctional Association, 206 North Washington St., Suite 200, Alexandria, VA 22314		
Email:	JECJRBOY@aol.com		
Telephone number:	352-538-2636		
Date of facility visit:	December 1-4 2014		
Facility mailing address: <i>(if different from above)</i>			
Telephone number:	903-628-3171		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:	Ms. Jenny Baird	Title:	Sergeant
Email address:	jenny.Baird@tdcj.texas.gov	Telephone number:	903-628-3171 extension 3188
Name of agency:	Texas Department of Criminal Justice		
Governing authority or parent agency: <i>(if applicable)</i>	State of Texas		
Physical address:	861 – B I-45 North, Huntsville, TX 77320		
Mailing address: <i>(if different from above)</i>	PO Box 99, Huntsville, TX 77342		

Telephone number:	936-295-6371		
Name:	Mr. Brad Livingston	Title:	Executive Director
Email address:	brad.livingston@tdcj.texas.gov	Telephone number:	936-437-2101
Name:	Mr. William Stephens	Title:	Director, Correctional Institutions Division
Email address:	william.stephens@tdcj.texas.gov	Telephone number:	936-437-2170

AUDIT FINDINGS

NARRATIVE:

The Prison Rape Elimination Act (PREA) Audit for the Barry B. Telford Unit from initial notification through this auditor’s Summary Report Adult Prisons and Jails/PREA Audit final report began in October 2014 with the notice that the Texas Department of Criminal Justice (TDCJ) through the American Correctional Association (ACA) had scheduled a PREA Audit with a tour date of December 1-5 2014, of the Telford Unit, New Boston, Texas. PREA Certified Auditor James Curington (lead) and PREA Certified Auditor Lynn McAuley were notified by ACA e-mail of their appointment and schedule.

The audit process started with contact from the TDCJ Office of Administrative Review and Risk Management, Huntsville, Texas. The Manager for the TDCJ, Review and Standards, mailed a USB thumb drive to the lead auditor. The thumb drive contained three essential parts; the administration folder, the unit folder, and the PREA Audit: Pre-audit Questionnaire Adult Prisons and Jails. A tremendous amount of material was included in these three folders (administrative folder, unit folder, questionnaire folder). The administration folder contained 43 sub-folders, one for each PREA standard and six additional sub-folders addressing: interviews, health appraisals of the incoming inmates, and treatment of offenders with intersex conditions, gender identity disorder, gender dysphoria, and staff personnel discipline forms. The unit folder contained 60 additional sub-folders, ranging from facility characteristics/schematics and the last ACA audit, to medical and investigative reports. The third folder contained the Pre-audit Questionnaire which was a stand-alone folder. Although a lot of material, it was comprehensive, specific, and very helpful to the auditors.

The PREA Resource Audit Instrument used for Adult Prisons and Jails was furnished by the National PREA Resource Center. To summarize, there are seven sections, A through G, comprised of the following: A) Pre-Audit Questionnaire, sent by TDCJ; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor’s Summary Report; F) the Process Map; and G) the Checklist of Documentation.

Following the protocols of making contacts, and checking on the posting of notices (posting was initiated through the American Correctional Association and the facility, Telford Unit) the auditors, on their own, began review of the Pre-Audit Questionnaire and the material sent prior to discussion and the audit visit. Each item on the thumb drive was reviewed. Of particular interest to the auditors was the

detailed information in the Pre-Audit Questionnaire completed by the Warden and the unit PREA Compliance Manager in November 2014. Also, in this preliminary review, special interest was taken in the TDCJ Safe Prisons/PREA Plan dated August 2014. This plan is 40 pages with a foreword by the Director of the Correctional Institutions Division, who is also the PREA Coordinator for TDCJ. This plan is divided into eight sections outlining and addressing everything from Administration to Zero Tolerance. Furthermore, the plan is supplemented by a larger document titled Safe Prisons/PREA Operations Manual (SPP0M). Again, this material was especially helpful in assisting the auditors in their review of the PREA compliance standards and in understanding TDCJ's commitment to PREA compliance.

Sunday evening, November 30, at an informal dinner in Texarkana, Texas, the Warden and key staff, including both Assistant Wardens, the PREA Compliance Manager, the Senior Chief Correctional Officer and others met to discuss the complexities, direction, and agenda of accomplishing this first PREA audit for the Barry Telford Unit. Also of note, accompanying the PREA audit team was an ACA audit team of three members reviewing the Telford unit for ACA re-accreditation. Although working independently, the ACA audit team was very helpful to the PREA audit team in sharing observations, insights, and points of interest.

After the evening's first meeting, the two PREA auditors met briefly to discuss tour protocols and points of interest for the following four days. The auditors stayed in Texarkana, Texas and commuted each day with TDCJ staff (i.e. the Region II PREA Manager, and the Central Office Safe Prisons/PREA Manager).

The site visit began at 8:00 a.m. on Monday, December 1 with arrival at the Administration Building parking lot. Permission was requested to drive the perimeter in order to have an overview of the compound, and facility. The audit team was accompanied by an Assistant Warden and the complete perimeter road was driven.

Following the tour of the perimeter, the team entered the front gate with the appropriate security precautions and proceeded to the Administration Building. Because of the joint audit, ACA and PREA, there was a large entrance meeting held in the visiting area of the Administration Building adjacent to the Control Room and entrance to the Compound. The meeting, with about 50 staff and auditors, lasted approximately 40 minutes. After introductions, and the conclusion of the meeting, the PREA auditors stayed in the area to discuss tour protocols for their part of the audit.

At approximately 9:30 a.m., the audit tour for PREA compliance began. The tour was led by Major Wade Alexander, Security Chief General Population; assisting was Sgt. Jenny Baird, Institutional PREA Manager; Sgt. Nathan Boone, Region II Safe Prisons/PREA Manager; and other visiting TDCJ staff.

The tour of the Barry B. Telford unit proceeded as follows:

Administration, 1 building, with numerous offices, including grievance, classification, disciplinary, risk management, case managers, investigators, Safe Prisons/PREA, and security threat group (STG)

The Central Compound to the Chapel, Commissary, 2 building.

Housing units, 3 building, 18 building, 19 building, 4 building.

Maintenance, 14 building.

Vocational/Educational, 5 building.

Laundry, Kitchen, Dining, 6 building.

Housing units, 7 building, 8 building.

Recreation, 9 building.

Medical, 10 building.

Solitary and Reception, 11 building.

Administrative Segregation, 12 building.

The tour was completed early Monday afternoon, but followed up with revisits Tuesday, Wednesday and Thursday.

The audit team established themselves in a couple of offices in the administrative complex within Building 1. At this time, a review of the inmate population was made and random inmates were selected from each housing unit for interview by the auditors. Staff interviews were also set up with the selection of six random staff from each shift, specialized staff to include intermediate or higher-level facility staff, medical and mental health staff, administrative staff, volunteers and contractors, investigative staff, staff that perform screening for risk of victimization and abusiveness, staff who supervise inmates in segregated housing, incident review team members, intake staff, staff charged with monitoring retaliation, and others designated by the interview protocols. The two certified PREA auditors proceeded with interviews. The auditors left the facility and continued to discuss and review operations in route and at the hotel until 9:00 p.m. that evening.

The following day the two auditors began at 6:30 a.m. with a review of the 43 PREA Standards and the Pre-Audit Questionnaire. Assisting the second day was: the headquarters Safe Prisons/PREA Manager Cassandra McGilbra; Maj. Wade Alexander; Sgt. Nathan Boone, Safe Prisons Region II PREA Manager; Sgt. Jenny Baird, Telford PREA Manager; Lieut. Sandra Clark; Sgt. R. Smith, observer Coffield Unit; and Officer April Foster. Following these intensive reviews of selected standards and the questionnaire, the auditors again began interviews continuing until about 7:00 p.m. that evening.

Wednesday began at 8:00 a.m. with staff interviews and then moved to the center of the compound for intake and screening of inmates to the Telford Unit. This process continued for approximately 3 hours and culminated with the Assistant Warden and his screening team meeting directly with each inmate and reviewing screening materials, intake documents, and inmate file screens as appropriate. This process re-emphasized to the audit team, Telford's commitment to PREA law.

While at the Telford Unit, 30 staff were formally interviewed from scripted questions. The interviews included the Warden, the PREA Compliance Manager, University of Texas Medical Branch (UTMB) health care staff, intake staff, human resource staff, and other specialized facility staff mentioned in the protocols. Additionally, approximately 25 inmates were formally interviewed including inmates from each housing unit, inmates processing through intake, and inmates in segregation. There were five intersex or transgender inmates listed at the Telford Unit. Some of these inmates were interviewed and all were given the opportunity to interview.

In addition to these formal interviews, many informal discussions were held with staff and inmates which assisted in this PREA compliance audit. Both auditors commented on how much information they received in these formal and informal interviews.

Also on Wednesday, the lead auditor met with the ACA compliance team to discuss any concerns, problems, issues, or circumstances that, in their view, would relate to the good order, management, and operation of the Telford Unit. There were no issues rising to the level of PREA noncompliance.

Thursday, December 4, the audit team concluded the interview and tour process. An informal interview was held at 11 a.m. with the Warden and some of her key staff. The lead auditor indicated that he would have an interim/final report within 30 days. At this time he would have reviewed his notes and have had discussions with the other PREA auditor and arrive at conclusions on each standard. The auditor noted there were no red flags that had come to either auditor's attention and moreover, they were positively impressed with the Telford Unit's commitment to the PREA audit process.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Barry B. Telford Unit of the Texas Department of Criminal Justice (TDCJ) is located in New Boston, Texas, 2 miles south of Interstate Highway 30 on Highway 98 in Bowie County. This facility is a large male, maximum-security unit housing a maximum of 2,872 inmates. The compound is trapezoidal in shape encompassing 96 acres within 2-12 ft. high chain link fences, secured with razor ribbon and three security towers (pickets). This perimeter fencing is approximately 1.2 miles in circumference and is patrolled on a paved perimeter road 24/7 by one armed roving vehicle. The unit sits on approximately 1,200 acres and is a large agricultural operation which includes farming, horses, kennels, gardens, and a cow/calf operation.

The Telford Unit was opened in July 1995 and was named after Barry B. Telford, a former State Representative who served on many legislative committees, including Corrections, Public Safety, and on the Criminal Justice Policy Council. The unit is a prototypical "2250 design" but has, over the years, upped its capacity, with additional housing, from the 2250 to the maximum 2872. The facility itself is in a rural farming area about 30 miles from Texarkana, Texas. Average daily population for the last six months is 2818 (approximately 58% minimum, 21% maximum, and 21% medium, 9/2014). There are no juveniles (under 18) at the Telford Unit.

This summary description of the Telford Unit addresses many inmate programs, work assignments, and departments, including: Food Service; Field/Agriculture/Farming Service; Laundry; Housekeeping; Maintenance; the Windham School District, which provides educational and vocational training; Library; the Chaplaincy Department offering volunteer programming, faith-based programs, and all faiths services; the University of Texas Medical Branch (UTMB) which manages medical, dental, and mental health services for the facility; Community Work Projects, including services to city and county agencies and area school districts; and Volunteer Initiatives such as employment/job skills, substance abuse education, life skills, victim awareness, and post-release housing.

Inmate housing and security in this large facility is of particular importance. There are essentially eight large living areas; buildings 18 and 19, dorms; buildings 3,4,7,8, with multiple cell housing units; building 11, holding transient inmates with 60 cells; and building 12 with 504 segregation cells. This mix of housing on the compound offers a variety of levels for supervision and security. The Telford staff use everything from dorm to single cells to appropriately manage the population. The auditors visited each area to get a "feel" for the operation, management, and safety of the facility.

The following is presented in the Welcome Handbook that was extended to the audit teams. "The mission of the Barry B. Telford Unit is to accomplish the mission of the agency. That is to protect the public, to promote positive change in offender behavior, to reintegrate offenders into society and to assist victims of crime. This is to be accomplished by utilizing the most effective methods of training and communication; employing a team approach and commanding the highest ethics and morals in our conduct, resulting in an accredited facility."

Facility demographics.

Rated capacity: 2872

Actual capacity: 2718

Age range of population: 18 – 70

Security: minimum, medium, maximum (TDCJ grades G1, G2, G3, G4, G5)

Number of full-time staff: 706; 552 security, 94 non-security, 11 Windham (educational/vocational), 49 UTMB (medical/mental health)

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1
Number of standards met: 40
Number of standards not met: 0
Number of standards non-applicable: 2

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

The Texas Department of Criminal Justice Correctional Institutions Division established a Safe Prisons/PREA Plan in August 2014. This plan is described in its forward as having a Zero Tolerance for all forms of sexual abuse and sexual harassment of offenders. Listed in the table of contents to the Safe Prisons/PREA Plan, the auditors got a good outline of this Zero Tolerance Policy, beginning with 1) administration and designation of staff, 2) offender management and services, 3) offender screening and assessment, 4) reporting allegations, 5) investigation, 6) training and education and 7) data collection followed up with additional administrative considerations. This is a 40 page document and further outlines, in its introduction, the process of preventing, detecting, and responding to sexual abuse, sexual harassment, extortion, and acts of violence perpetrated against an offender. It is further quoted "TDCJ employees play an invaluable role in the Safe Prisons/PREA program. Staff participation in the program is essential in identifying aggressive behavior and taking the necessary steps to ensure the safety and security of Texas correctional institutions."

Moreover, a lengthy Safe Prisons/PREA Operations Manual (SPPOM) which addresses 1) Administration, including duties; 2) Intervention; 3) Assessment, and Screening; 4) Reporting/Receiving Allegations; 5) Investigation; 6) Training; 7) Grids, Codes, Files and Transfers; 8) Reporting and 9) 22 attachments. This manual and its contents described as being "essential to the operation of the Safe Prisons/PREA Operations program and shall be adhered to at all times to ensure continuity and professionalism throughout the system".

Through discussions with staff and inmates, observation of bulletin boards, posters, handouts and materials, review of inmate and staff handbooks, and personnel policies, it is clear that the Telford Unit is committed to Zero Tolerance of sexual abuse and sexual harassment.

Organizational charts were reviewed and it was noted that the PREA Compliance Manager is also the Director of the Correctional Institutions Division and there are PREA coordinators for each region and a PREA manager at the institutional level who has direct access to the Warden.

Of particular note is the staff pocket handout addressing TDCJ's mission statement. In that handout is the Sexual Assault/Abuse Agency "Zero Tolerance Policy" that the Texas legislature has adopted regarding sexual abuse and that any such violation must be reported to the Unit Major or Safe Prisons Program Manager, and followed by information on the recognition of sexual assault/abuse red flags and how to report to one's supervisor.

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

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

TDCJ Administrative Directive, AD 02.46, Employees of Private Businesses and Governmental Entities Contracting with the Texas Department of Criminal Justice, requires compliance with agency policy, specifically, Zero Tolerance towards all sexual abuse and sexual harassment.

The Safe Prisons/PREA Plan details "shall be applicable to all individuals, including visitors and volunteers, employed by, under contract with, or supervised by the TDCJ, including professional staff and any person who is involved directly or indirectly, with the care and custody of the offenders".

Contracts and examples of contracts were reviewed. The interview with the Agency Contract Manager was reviewed. Contract employees were interviewed and it was clear from this review and interviews that Zero Tolerance and compliance with PREA law is substantiated. Contracts themselves each contained PREA statement documents of compliance requirements.

§115.13 – Supervision and Monitoring

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

The Telford Unit is a maximum security facility with staffing and perimeter security outlined in the description of the unit. The Warden and her staff, including the Human Resource Department's comprehensive involvement, has assured staffing according to the needs and priorities set by the agency. The Warden and the Human Resource Manager at the Unit routinely review the staffing plan, recruitment policies, and institutional needs to assure the safety of staff and inmates.

Intermediate and higher level staff conduct unannounced rounds to identify any deviation from policy and procedure, including deviation from compliance with the Prevention of Sexual Abuse and Sexual Harassment Policy.

The Security Operation Procedures Manual (SOPM) and post orders addressed supervision duties and responsibilities including unannounced rounds. Staff compliance is maintained through these unannounced rounds as well as through incident reviews and reports. Logs are maintained of the unannounced rounds.

Interviews confirmed staff and inmates felt safe at this facility.

§115.14 – Youthful Inmates

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

There are no youthful offenders, inmates under the age of 18, at the Telford Unit.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

Policy and procedures governing cross gender viewing and searches were reviewed as well as actual searches conducted during the audit visit. Policy does allow cross gender strip and cross gender visual body cavity searches of inmates in emergency situations. However, no cross gender viewing or searches are conducted absent exigent situations.

There are no female inmates at the Telford Unit.

Procedures require that staff of the opposite gender announce their presence when entering inmate housing, this was observed. It was discussed several times that the idea of simple courtesy and limited privacy could and should be extended in inmate housing without jeopardizing security.

It was confirmed by interviews with staff and inmates that inmates can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them. Inmates and staff felt there was some sense of privacy.

All staff received training in conducting patdown searches, counts, and unannounced rounds to help assure compliance with the standard that limits cross gender viewing and searches.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

The TDCJ, through its Correctional Mental Health Policies and through Administrative Directives, AD 04.25 and AD 06.25 addresses interpreter services, American Sign Language services and offenders with special needs. The agency has established procedures to provide inmates, with limited English proficiency, an equal opportunity to participate in, and benefit from all aspects of the agency's efforts to prevent and respond to sexual abuse and sexual harassment.

Agency policy prohibits use of inmate interpreters or other types of inmate assistants except in limited circumstances where there may be an extended delay in obtaining an effective interpreter. In the past 12 months, there have been zero (0) use of inmate interpreters, readers or other types of inmate assistants and it was not the case that there was an extended delay.

§115.17 – Hiring and Promotion Decisions

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

Executive Directives and Policies. PD 71, 73, 75, pertaining to criminal background checks, promotions, hiring of employees and contractors, and policy concerning criminal background checks of current employees and contractors were reviewed by the auditors. These reviews reveal that before the hiring of any new employee who has contact with inmates, a criminal background check is done. Additionally, agency policy requires criminal background record checks be conducted at least every five years and that there is a system in place to do such.

Personnel files were reviewed, the Warden and Human Resource Manager were interviewed and it was evident that the agency policy and PREA law were being followed concerning hiring, promotional decisions and background checks.

§115.18 – Upgrades to Facilities and Technology

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

There have been no substantial expansions or modifications of existing facilities since August 20, 2012.

The agency is presently installing and enhancing their video monitoring and electronic surveillance system. At this time the video monitoring system shows 141 ± cameras that record 24/7 in general housing areas, recreation, food service and entrance and egress areas, but none directly interfering with inmates' ability to shower, dress, and perform bodily functions with some privacy. Comprehensive supervision and limited access to blind spots, or unsupervised areas assist with prevention of sexual assault/sexual abuse.

When the new camera system is completely installed there will be 741 digital cameras in the facility.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

TDCJ is responsible for administrative and criminal sexual abuse investigations. Safe, Prison/PREA Operations Manual, SPPOM 05.01 assures investigators follow a uniform evidence protocol through the use of the Sexual Abuse Checklist operating memorandum.

Corrections Managed Health Care (CMHC) policy G – 57.1 also stipulates the appropriate forensic medical examinations.

Emergency medical healthcare along with forensic examinations by SANE/SAFE staff are procured from Wadley Regional Medical Center, 1000 Pine St., Texarkana, TX. The facility offers all inmates who experience sexual abuse, access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. There have been three (3) forensic medical examinations by SANE/SAFE staff during the past 12 months.

The facility has attempted to obtain a Community Victim Advocate, from a rape crisis center, available to the victim. However, at this time it has been unsuccessful. When a victim advocate is not available, the Telford Unit provides victim advocate services by qualified and trained staff members.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

TDCJ Safe Prisons/PREA Plan ensures referrals of all allegations for investigation. Documentation is made of all reports of sexual abuse and sexual harassment. These are investigated and reported with findings; documentation is maintained. Administrative Directive, AD 02.15 Operations of the Emergency Action Center (EAC) and Reporting Procedures indicates the immediacy of reporting these incidents and crimes to the Office of the Inspector General (OIG). The Safe Prisons/PREA Plan also outlines sexual abuse response and investigation and offender protection investigations, all of which are also outlined for inmates in the offender orientation. Interviews with the investigative staff, random staff and inmates indicate knowledge and familiarity with these policies.

The number of criminal and/or administrative investigations of alleged inmate sexual abuse and harassment that were received in the past 12 months was 53. During the past 12 months, the number of allegations resulting in administrative investigations were 51 and during the past 12 months, the number of allegations referred for criminal investigation were 21.

Agency policy and the institutional procedure complies with PREA requirements relating to allegations and the investigation of such. The agency and institution both document all allegations of sexual abuse and referrals of allegations of sexual abuse and sexual harassment for criminal investigation.

§115.31 – Employee Training

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

Training records, staff interviews and curriculum review indicated that staff at the Telford Unit were well-trained. Staff are knowledgeable about the Zero Tolerance Policy for sexual abuse and sexual harassment. They were knowledgeable on how to perform their responsibilities in detection, reporting and responding. Staff have received security pocket guides outlining the TDCJ's mission statement, the officers' code of ethics and a list of pertinent, timely items such as first responder duties, emergency situations, safe prisons program, and weather extremes. The security pocket guide coupled with the business card-size information notices detailing Zero Tolerance Policy for sexual assault/abuse, red flags

suicide prevention and response techniques, all emphasize and support the training efforts for Telford correctional staff.

The auditors, in reviewing and interviewing staff training, noted that there is teamwork exhibited by the institution as a whole and there is an importance placed on professionalism and the efforts in complying with PREA standards, ACA standards and in the daily performance of duties.

Random staff interviews and random inmate interviews also clearly indicated a thorough, and consistent training program.

Note: an emphasis on how much attention has been paid to PREA training is shown by having 615 of 617 total employees trained or re-trained on PREA requirements.

The auditors consider this, 115.31, to "exceed standards".

§115.32– Volunteer and Contractor Training

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

All volunteers and contractors who have contact with inmates have been trained in their responsibilities under TDCJ's policies which include procedures regarding sexual abuse/harassment prevention, detection, and response.

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

In the past 12 months, 38 volunteers and contractors were trained in the agency's policies and procedures regarding sexual abuse/harassment prevention, detection and response.

§115.33 – Inmate Education

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

Admission and Orientation was observed, the Inmate Handbook was reviewed and interviews with staff and inmates revealed that inmates receive training and information about the Zero Tolerance Policy and how to report instances of, or suspicions of abuse or harassment.

Inmates received training at intake, handouts during intake, and video training during orientation.

The number of inmates who received information at intake was 1145. The number of inmates committed during the past 12 months whose length of stay in the facility was for 30 days or more, who received comprehensive education was 935. The number of inmates in the facility, who did not receive comprehensive education within 30 days was zero (0).

Inmate PREA education is available in different formats to accommodate all inmates. Key information about the agency's PREA policy is continuously and readily available through posters, handouts and other written formats.

The agency maintains documentation of inmate's participation in PREA education.

Inmate interviews confirmed PREA education.

§115.34 – Specialized Training: Investigations

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

TDCJ policy, along with investigator training curriculum and personnel policy, all reflect that investigators are to be trained in conducting sexual abuse investigations in confinement settings. The specialty training was verified through investigator interviews and review of training records and the curriculum.

There are 134 investigators currently employed by TDCJ who have received and completed the required training. The agency maintains documentation showing that investigators have completed this training.

The Office of the Inspector General (OIG) manages the PREA compliance training.

§115.35 – Specialized training: Medical and mental health care

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

Correctional Managed Health Care policies, CMHC 25.1 Orientation, CMHC C 19 Continuing Education and CMHC G 57.1 Sexual Assault and Sexual Abuse all direct specialized training for medical and mental health care staff. Each of these policies footnote PREA responsibilities

for continuing education. The University of Texas Medical Branch (UTMB) staff/practitioners who regularly work at the Telford Unit have received the specialized training. It should be noted that these practitioners do not conduct forensic medical exams.

The agency maintains documentation showing that medical and mental health practitioners have completed the required training.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

The Safe Prisons/PREA Operational Manual (SPPOM) and the Safe Prisons/PREA Plan both address and outline the screening processes for the risk of victimization and abusiveness. Included in the manual is the Offender Assessment Screening Form which addresses the risk of sexual victimization or the risk of sexual abuse of other inmates. This form is completed within 72 hours of intake. The intake process was reviewed and the auditors observed the process.

The intake process conforms to PREA standards. The form/checklist for screening, include questions regarding mental, physical and developmental disabilities and whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming, and whether or not the inmate has previously experienced sexual victimization. The inmates own perception of vulnerability was also pursued. The screening/intake process was well managed and thorough. This information was further related to the Deputy Warden and additional committee staff for appropriate use and placement.

1127 inmates entered the facility in the past 12 months and were screened. Of these, 31 were reassessed within 30 days for risk of sexual victimization or being sexually abusive.

This assessment, and screening process performed at Telford appears to positively assist in the effective and efficient inmate security and management at this maximum security unit.

§115.42 – Use of Screening Information

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

Interviews with intake and mental health staff supported by interviews with inmates as well as observation and review of documentation supports the use of the screening information as being on a “need to know” basis and consistent with appropriate custody and security. Health care staff were especially concerned with privacy and confidentiality issues balancing the use of screening information with the goal of keeping separate those vulnerable inmates at high risk of being sexually victimized by those that may be sexually abusive.

There were five inmates listed as transgender or who perceived themselves as transgender/gender nonconforming, whose housing and program assignments were made on an individual case basis. These inmates were interviewed; or offered interviews and declined.

§115.43 – Protective Custody

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

The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in the involuntary segregated housing. The Telford Unit has a large segregating housing unit (SHU) but, by the numbers, has placed no inmates in protective custody involuntarily unless there was both a statement by the facility showing concern for the inmate’s safety, and the reasons why alternative means of separation could not be arranged.

The auditors, both from inmate and staff interviews, felt that the staff at the Telford Unit were very creative in addressing individual housing needs and program needs consistent with the security and safety of the individual inmate.

§115.51 – Inmate Reporting

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

The TDCJ Safe Prisons/PREA Plan has established procedures allowing for multiple internal ways for inmates to report privately to agency officials. Additionally, the Safe Prisons/PREA Operational Manual and attachments outline ways for inmates to report sexual harassment or sexual abuse.

Offenders may report allegations directly to the Major, the Office of the Inspector General, or the PREA Ombudsman. Reports to the PREA Ombudsman may be made confidentially. Third parties, including fellow offenders, staff members, family members, attorneys, and advocates, shall be permitted to assist offenders and request for administrative remedies

relating to an allegation of sexual abuse. Emergency grievances alleging substantial risk of imminent sexual abuse may be filed.

This information is attainable in inmate handbooks, posters, bulletin boards, information handouts, libraries and, of course, through staff.

The agency provides for at least one way for inmates to report harassment or abuse that is not part of the Correctional Institutions Division, TDCJ. The Texas Board of Criminal Justice (TBCJ) has established a PREA Ombudsman Office for reporting PREA incidents.

Interviews with inmates and staff, revealed that inmates know how to report sexual abuse and sexual harassment and that staff know how to report sexual abuse and sexual harassment.

§115.52 – Exhaustion of Administrative Remedies

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

The agency, TDCJ has an administrative procedure for dealing with inmate grievances regarding sexual abuse along with policy and procedures for filing emergency grievances alleging that an inmate is subject to substantial risk of imminent sexual abuse.

Administrative Directives, AD 03.77 and AD 03.82 addressing offender grievances and management of offender grievances is available to inmates and staff. Additionally, the Inmate Handbook and Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual also cover these topics.

In the past 12 months, there were 26 grievances filed alleging sexual abuse. Of these, 25 reached a final decision within 90 days after being filed. In the past 12 months two (2) grievances resulted in disciplinary action by the agency for having been filed in bad faith.

§115.53 – Inmate Access to Outside Confidential Support Services

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

The TDCJ Safe Prisons/PREA Plan indicates that 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. The

Unit is also responsible for enabling reasonable communication between offenders and these organizations and agencies in as confidential a manner as possible.

There are lists of outside confidential support services provided to the inmate population. However, there is no Memorandum of Understanding (MOU) or agreement with community service providers that have been willing and able to support inmates with these emotional services related to sexual abuse in this community. The institution has solicited help. The Religious Department chaplains have been trained in these kind of support services and work with the inmate population to meet their needs.

The Unit has attempted to enter into MOU's or other agreements with community service providers, but have been unable to acquire such at this time.

§115.54 – Third-Party Reporting

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

The Texas Board of Criminal Justice Ombudsman website provides a method to receive third-party reports of inmate sexual abuse or harassment. This third-party reporting can also be accomplished through the Office of the Inspector General, as well as through the Ombudsman.

Third-party reporting information is distributed through the TDCJ, PREA website, brochures, pamphlets, and handouts.

§115.61 – Staff and Agency Reporting Duties

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

According to TDCJ policy, all staff must report immediately, 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 are reported in the incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This is taken from page 23 of the TDCJ Safe Prisons/PREA Plan August 2014.

Training records, as well as specialized staff and random staff interviews confirm this responsibility.

§115.62 – Agency Protection Duties

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

The Telford institutional staff are very knowledgeable and well trained in their protection duties when an inmate is subject to imminent sexual abuse or risk of imminent sexual abuse.

The Safe Prisons/PREA Operational Manual and the Administrative Directive AD 02.15 outline the immediate action that is to be taken to protect inmates who are in substantial risk of sexual abuse. It also outlines actions that need to be taken to assist and implement appropriate protective measures without reasonable delay.

In the past 12 months, the number of times the agency or facility has determined that an inmate was subject to substantial risk of imminent sexual abuse was 35. The Telford Unit was very diligent in taking responsibility for immediate action and review of each of the cases in which information was obtained of substantial risk of imminent sexual abuse. The reaction time averaged about 11 minutes.

§115.63 – Reporting to Other Confinement Facilities

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

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, it is required by policy, that the Warden of the facility that received the inmate must immediately notify the facility where the sexual abuse is alleged to have occurred. Through review of policy and in the interview with the Warden, it was noted that the staff is knowledgeable of this procedure. This is also outlined in the Safe Prisons/PREA Operating Manual and the Safe Prisons/PREA Plan.

During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero (0). In the past 12 months, this facility has not received allegations of sexual abuse from other facilities regarding inmates transferred from the Telford Unit. Screening information as well as specialized staff and inmate interviews support compliance.

§115.64 – Staff First Responder Duties

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

The Texas Department of Criminal Justice Safe Prisons/PREA Operating Manual; its Administrative Directive, AD 16.03, Evidence Handling; and the Office of the Inspector General Operating Procedure Manual; all detail the policy and action for the first responder to an allegation of sexual abuse. The first security staff member to respond to the report that an inmate was sexually abused is required to separate the alleged victim and abuser, preserve and protect the crime scene, and request the alleged victim take no action to destroy evidence. Policy also requires that efforts be made to ensure the alleged abuser does not take any action that could destroy evidence, and then notify the immediate supervisor or shift commander.

The Telford Unit has further emphasized first responder duties by distributing pocket cards and pocket handouts on sexual assault/abuse to include steps to take if a sexual assault occurs. These steps and duties were confirmed by random staff interviews, investigative staff interviews, higher and intermediate level supervisor interviews, and through review of training curriculum and documents.

§115.65 – Coordinated Response

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

The TDCJ Safe Prisons/PREA Operation Manual dictates responding to an allegation of sexual abuse requires a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services and victim advocates or victim offender representatives. Procedures have been outlined to provide a systematic notification in the response process following a reported sexual abuse incident.

The Safe Prisons/PREA Plan details coordinated actions to be taken in response to an incident of sexual abuse. Interviews with the Warden and higher-level staff indicated a commitment by the facility leadership for handling a coordinated response.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

The TDCJ is not responsible for collective bargaining on the agency's behalf. Texas is a "right to work state" and does not have collective bargaining that would interfere with the preservation of the agency's ability to protect inmates from contact with abusers.

§115.67 – Agency protection against retaliation

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

The Safe Prisons/PREA Plan of the Texas Department of Criminal Justice protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by staff or inmates.

Furthermore, personnel policies covering sexual harassment and discourteous conduct of a sexual nature, general rules of conduct, sexual misconduct with offenders, discrimination in the workplace, also protect against retaliation.

There is a 90 day monitoring time period for retaliation review. An offender 90 day monitoring form and a staff 90 day monitoring form, as well as other intervention practices are indicative of the agency's commitment to prevent retaliation.

The facility has designated to a Correctional Major, the responsibility of monitoring retaliation by inmates. The Warden is responsible for monitoring staff retaliation.

There have been zero (0) number of times of an incident of retaliation has occurred in the past 12 months.

§115.68 – Post-Allegation Protective Custody

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

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

There have been zero (0) number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months.

§115.71 – Criminal and Administrative Agency Investigations

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

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

Additionally, the agency's Administrative Directive AD 16.20 Reporting Incidents/Crimes to the Office of the Inspector General, establishes policy related to criminal and administrative agency investigations. This policy includes the direction that allegations of conduct which appear to be criminal are referred for prosecution.

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

§115.72 – Evidentiary Standard for Administrative Investigations

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

The Safe Prisons/PREA Plan, TDCJ, imposes a standard of preponderance of the evidence for determining whether or not allegations of sexual abuse or sexual harassment are substantiated.

Interviews with specially trained investigators confirmed compliance with the standard.

§115.73 – Reporting to Inmate

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

The Agency Safe Prisons/PREA Operations Manual requires that all inmates who make allegations of sexual abuse shall be informed as to whether the investigative finding was substantiated (sent to prosecution/sustained) or unsubstantiated (administratively closed/not sustained) or unfounded. Additionally, the offender victim shall be notified following the suspect assailant indictment or conviction on the related charge.

Interviews with investigators confirm that an inmate who makes an allegation that he suffered sexual abuse at the Telford Unit is informed verbally or in writing as to whether or not the allegation was determined to be substantiated or unsubstantiated or unfounded following an investigation.

§115.76 – Disciplinary sanctions for staff

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

Disciplinary sanctions for violations of the agency's policy relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of acts committed.

Personnel policy of the Texas Department of Criminal Justice list disciplinary sanctions up to and including termination for violation of agency sexual abuse and sexual harassment policies.

Personnel policies. PD 13, PD 22, PD 29 relating to sexual harassment, discourteous conduct of a sexual nature, general rules of conduct in disciplinary action, guidelines for employees and sexual misconduct with offenders, detail the sanctions and actions required.

In the past 12 months, there have been zero (0) number of staff from the facility that have violated agency sexual abuse or sexual harassment policies.

§115.77 – Corrective action for contractors and volunteers

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

The Volunteer Service Plan of the TDCJ in conjunction with the Safe Prisons/PREA Plan and supported by the volunteer and contractor training and orientation and by the special PREA video training and the security emphasis required by contractors and volunteers, all outline and emphasize the gravity of any contractor or volunteer who engages in sexual abuse to the extent that they will be reported to law enforcement agencies, unless the activity was clearly not criminal.

Volunteers and contractors who engage in sexual abuse are dismissed and reported to law enforcement agencies (unless the activity was clearly not criminal) and prohibited from further contact with inmates.

In the past 12 months, there have been zero (0) number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

§115.78 – Disciplinary sanctions for inmates

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

Inmate Discipline Policy, GR – 106, Disciplinary Rules and Procedures for Offenders, and the Safe Prisons/PREA Plan outline disciplinary sanctions for inmates for sexual abuse and sexual harassment. The inmate discipline policy is substantial (47 pages) outlining major and minor offenses, all with different levels, but clearly indicating a very formal disciplinary process resulting in administrative findings. Inmates are subject to disciplinary sanctions following a criminal finding of guilt for inmate on inmate sexual abuse. Furthermore, interventions, therapy, and counseling are addressed in Correctional Managed Health Care Policy CMHC E–35.

§115.81 – Medical and mental health screenings; history of sexual abuse

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

All inmates at the Telford Unit that disclosed prior sexual victimization during screening are offered follow-up with a medical or mental health practitioner. This follow-up, as outlined in the Safe Prisons/PREA Plan, in the Safe Prisons/PREA Operational Manual and in correctional mental health care policies is administered by the mental health staff, University of Texas Medical Branch of the Telford Unit. Policy outlines of follow-up services are offered within 14 days of intake screening. Follow-up is outlined in CMHC E – 35.2, Mental Health Evaluation and CMHC G 57.1, Sexual Assault/Sexual Abuse. Information related to sexual victimization or abusiveness that occurred is strictly limited to medical and mental health practitioners (UTMB). Medical and mental health practitioners obtained informed consent before reporting prior sexual victimization that did not occur in an institutional setting.

§115.82 – Access to emergency medical and mental health services

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

Emergency medical care is provided through University of Texas Medical Branch staff, 911 ambulance services, and Wadley Regional Medical Center, Texarkana, TX.

Correctional Mental Health Care Policies, CMHCP and Correctional Managed Health Care G 57 as well as the Safe Prisons/PREA Operating Manual dictate that inmates who are victims of sexual abuse receive timely unimpeded access to emergency medical treatment and crisis intervention services. Treatment services are provided to every victim without financial cost as outlined in Medical/Mental Health Treatment Sexual Assault Corrections Mental Health Care Policy, CMHC G – 57.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

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

Medical/mental health treatment is outlined in the Safe Prisons/PREA Plan in the section Ongoing Medical and Mental Health, it is further detailed in the Correctional Managed Health Care Policy G – 57.1, Sexual Assault/Sexual Abuse which further addresses ongoing care and follow-up. Healthcare employees interviewed at the Telford Unit confirmed their commitment and dedication to appropriate and personalized total healthcare to the inmates. Random interviews with inmates also confirm compliance.

Sexual assault awareness brochures and handout materials received at intake and other information in the Inmate Handbook advises the inmate population of the offerings by the Medical and Mental Health Department concerning evaluation, treatment and ongoing medical and mental health care as appropriate for the sexual abuse treatment of inmates, victims and abusers.

§115.86 – Sexual abuse incident reviews

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

The Telford Unit, in the past 12 months, has reviewed 19 administrative investigations of alleged sexual abuse and seven criminal investigations of alleged sexual abuse, excluding unfounded incidents.

The TDCJ Administrative Directive, AD 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious and Unusual Incidents, and the Safe Prisons/PREA Plan, both direct that reports be made which are reviewed by the Warden and staff at the facility. There is a monthly Safe Prisons/PREA report as outlined in the Safe Prisons/PREA Operational Manual 08.01, which involves the Warden and the PREA Compliance Manager reviewing findings and implementing recommendations or improvements concerning such reports and incidents.

There is a sexual abuse incident review team at Telford, including upper level management staff. They meet monthly.

§115.87 – Data Collection

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

The agency collects accurate information and data for every allegation of sexual abuse at facilities under its control. The Texas Department of Criminal Justice, through its Safe Prisons/PREA Plan and Safe Prisons/PREA Operational Manual directs this data collection.

The agency aggregates this incident-based sexual abuse data at least annually. The Office of the Inspector General annual report, and the Survey of Sexual Violence Annual Report (SSV) corroborate this standard.

§115.88 – Data Review for Corrective Action

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

The Telford Unit uses the agency annual report and monthly reports to improve the effectiveness of its sexual abuse prevention, detection and response policies and training, including identifying problem areas, and taking corrective action on an ongoing basis.

Interviews with the Warden and higher intermediate staff plus review of the monthly and annual reports, substantiates this data collection and review for corrective action.

§§115.89 – Data Storage, Publication, and Destruction

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

The Texas Department of Criminal Justice Safe Prisons/PREA Plan ensures that the incident based information and aggregate data is collected and securely retained. The TDCJ maintains its sexual abuse data pursuant to statute, rule, standard 115.87 for at least 10 years after the initial data collection, unless federal, state, or local law requires otherwise.

The records retention schedule brochure was reviewed by this auditor along with a memo from records management indicating security of the Texas government records from creation to final disposition. Records are required to be maintained as part of the Texas State Library and according to Texas Government code 444.184.

The brochure on records retention schedule, the letter on records management and the Safe Prisons/PREA Plan were again reviewed and confirm storage, publication, and destruction.

The Office of the Inspector General PREA Ombudsman makes available to the public its annual report on PREA.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

James Curington_____

01/02/2015_____

Auditor Signature

Date