

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 11/08/2017

Auditor Information			
Auditor name: Chris Sweney			
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Email: csweney.prea@gmail.com			
Telephone number: (402) 658-0344			
Date of facility visit: September 13 – 15, 2017			
Facility Information			
Facility name: TDCJ George Beto Unit			
Facility physical address: 1391 FM 3328 Tennessee Colony, Texas 75880			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number:			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Norris Jackson			
Number of staff assigned to the facility in the last 12 months: 580			
Designed facility capacity: 3471			
Current population of facility: 3422			
Facility security levels/inmate custody levels: G1-G4			
Age range of the population: 18-88			
Name of PREA Compliance Mngr: Jeffery Clark		Title: Unit Safe Prisons PREA Manager	
Email address: Jeffery.clark@tdcj.texas.gov		Telephone number: 903-928-2217 ext. 3110	
Agency Information			
Name of agency: Texas Department of Criminal Justice (TDCJ)			
Governing authority or parent agency: <i>(if applicable)</i>			
Physical address: 861-B I-45 North, Huntsville, Texas, 77320			
Mailing address: <i>(if different from above)</i> P.O. Box 99, Huntsville, Texas, 77342			
Telephone number: 936-295-6371			
Agency Chief Executive Officer			
Name: Bryan Collier		Title: Executive Director	
Email address: Bryan.Collier@tdcj.texas.gov		Telephone number: 936-437-2101	
Agency-Wide PREA Coordinator			
Name: Lorie Davis		Title: Director, Correctional Institutions	
Email address: Lori.Davis@tdcj.texas.gov		Telephone number: 936-437-2170	

AUDIT FINDINGS

NARRATIVE

A PREA audit of the TDCJ George Beto Unit was conducted September 13th – 15th, 2017 by Chris Sweney, Certified PREA auditor. The audit of the Beto Unit was conducted in conjunction with their American Correctional Association accreditation audit. As part of the accreditation audit a full tour of the facility was conducted along with three days of file reviews and staff and inmate interviews. The tour included all area of the main and annex facilities including inmate housing, segregation, intake (draft), kitchen, laundry, recreation, control, all program areas, medical and administration. Pre Audit posters were observed in all housing units and common areas. No inmates specifically requested to speak with this auditor nor had this auditor received any written correspondence from inmates or staff prior to the onsite visit.

On the first day of the audit the Safe Prisons PREA Manager provided the auditor with a roster of staff assigned to each shift. A total of ten (12) random staff interviews from the day and evening shift were conducted. Specialized staff interviews included the Warden, Safe Prisons PREA Manager, the Intake Supervisor who also does the initial screening of inmates when arriving at the facility; Investigators from the Office of Inspector General who are responsible for PREA related investigations as well as medical staff, program staff and volunteers.

On the following two days of the audit Safe Prisons PREA Manager provided the auditor with a roster of all (3422) inmates at the facility. Inmates were randomly selected by the auditor. At least one inmate from each housing unit and the trustee camp was interviewed. There was one inmate who spoke limited English interviewed with no issues. No inmates were identified that had hearing or visual impairments. Two inmates who identified as either gay or transgendered were also interviewed. A total of 49 random inmate interviews were completed. The Beto Unit reported thirty-one instances of either sexual abuse or harassment for the audit period. Nine of these reported incidents were referred for criminal investigation. The PREA response and investigative process was thoroughly reviewed and found to be well above standard.

DESCRIPTION OF FACILITY CHARACTERISTICS

The George Beto Unit is a maximum-security facility operated by the Texas Department of Criminal Justice (TDCJ) for adult male offenders. It is located in Tennessee Colony, Anderson County, Texas, and is approximately 120 miles southeast of Dallas, Texas. The Beta Unit was open in June 1980. There are 27 buildings as well as 58 residential housing structures. The main facility is situated on 51.9 acres that is surrounded by a double chain-link fence system with eight feet between the fences. The interior fence is ten feet high with a roll of razor ribbon at the top. The exterior fence, with a three-inch razor mesh pattern, is also ten feet high with a roll of razor ribbon at the base, at the middle and on the top. The roof edge of the main building also has a roll of razor ribbon. There are four watch towers adjacent to the exterior fence to provide for perimeter security. One armed mobile unit patrols the perimeter 24 hours a day, seven days a week. There are two vehicle entrances and two pedestrian entrances. Visitors are screened by an officer outside the secure perimeter and also a picture identification must be viewed by the picket/ tower officer via a camera system prior to the exterior gate being opened.

Inside the secure perimeter are the main facility, industrial shops, vocational buildings, and the regional maintenance office. The main building has a corridor approximately one-quarter mile in length and is a "telephone-pole" design. The building is designated as north and south sections with the 23-bed infirmary, kitchen, two dining halls, laundry, unit supply, maintenance and boiler plant located on the east side of the central corridor. The west side of the main corridor has an education building, visitation, administrative offices, and chapel. There is a gymnasium on each end of the corridor as well as access to recreational yards on the north and south sections. Adjacent to the center of the corridor are a north shower and south shower, each containing 100-group showers. There are 12 inmate-housing wings located directly off the main corridor on the north side and eight inmate-housing wings on the south side. Each wing has 33 cells on each of three tiers.

The Beto Unit has one inmate-housing wing that is used for in-transit inmates and protective custody investigation inmates. The Trusty Camp is located outside the secure perimeter across the road from the main facility and has three dormitories with a total capacity of 321. Minimum-security inmates are housed at this location and provide support services such as grounds keeping, kennel, agriculture, transportation garage, facility garage, power substation well house, waste treatment, and community service projects.

Other buildings outside the secure perimeter include the following: armory, power substation, well house, waste treatment, garage, transportation, water treatment plant, kennel, equine stables, employee housing, bachelor officer quarters, and agricultural operations.

The south school is utilized as a regional training academy. There are multiple classrooms and also access to the south gymnasium. Pre-service training and annual/refresher training is conducted in this area.

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded: 6

Number of standards met: 35

Number of standards not met: 0

Number of standards not applicable: 2

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

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

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.

The Texas Department of Criminal Justice (TDCJ) has a zero tolerance policy towards all forms of sexual abuse and harassment. This policy outlines how the department prevents, detects, and responds to incidents of sexual abuse and sexual harassment. The policy also includes definitions of prohibited behaviors and sanctions for those who participated in those behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

The TDCJ has 104 facilities and has designated an agency wide PREA Coordinator to oversee the development and implementation of their PREA program. A Regional PREA Compliance Manager is assigned to each of Texas’s six regions. Each facility including the George Beto Unit has a designated Safe Prisons/PREA Manager. The Safe Prisons/PREA Manager indicated during his interview that he has sufficient time and authority to develop, implement, and oversee the facilities efforts to comply with the PREA standards.

Policy, Materials, Interviews and Other Evidence Reviewed
Executive Directive ED-03.03 (rev.3) Safe Prisons/PREA Program
TDCJ Safe Prisons/PREA Plan
TDCJ Organizational Chart
Unit Safe Prisons/PREA Manager Interview

Corrective Action
No corrective action needed

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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TDCJ contracts with a number of organizations to provide correctional services. TDCJ does require all new contract holders to comply with PREA standards however; The George Beto Unit does not independently contract for the confinement of its inmates. This standard is not applicable to the Beto Unit.

Policy, Materials, Interviews and Other Evidence Reviewed

Administrative Directive AD-02.46 (rev.4) Employees of Private Businesses and Governmental Entities Contracting with the TDCJ

Corrective Action

No corrective action needed

Standard 115.13 Supervision and monitoring

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

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The George Beto Unit is a linear style facility and has a staffing plan which accounts for generally accepted detention and correctional practices; TDCJ follows applicable State and local laws, regulations and standards to determine staffing levels. The Beto Unit has no Judicial, Federal or other internal or external findings of inadequate staffing. All components of the facility’s physical plant, composition of the inmate population and placement of supervisory staff are also considered.

Deviations from the staffing plan are documented and reported to the Warden. Staffing requirements are assessed annually and adjustments are made if necessary.

Unannounced rounds are completed by supervisors on each shift and documented in a permanent log book. The Beto Unit provided a copy of their tour logs with the pre-audit documentation which shows this as a regular practice. During the onsite visit, supervisors demonstrate how unannounced rounds are documented. All inmate interviews indicated that supervisors as well as administrative staff made regular rounds. Policy prohibits staff from alerting other staff members that supervisory rounds are occurring.

Policy, Materials, Interviews and Other Evidence Reviewed

Executive Directive ED-03.03 (rev.3) Safe Prisons/PREA Program

TDCJ Safe Prisons/PREA Plan

SOPM 0702 Deletion, New Installation or Relocation of Video Surveillance Equipment

SOPM 08.06 Security Operations Annual Review of Turnout Rosters Procedures

Administrative Directive AD 11.52 Security Staffing

Administrative Directive AD 11.52 Security Staffing

PD-22 General Rules of Conduct and Disciplinary Action Guidelines for Employees

Staffing Plan Review

Random Staff Interviews

Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.14 Youthful inmates

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

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The George Beto Unit does not house youthful offenders. This standard does not apply.

Policy, Materials, Interviews and Other Evidence Reviewed

CPOM-01.02 Separation of Youth
 Safe Prisons PREA Plan
 Administrative Segregation Plan
 UCP 16.15 State Jail Youthful Offenders
 I-219 Exercise Pamphlet English/Spanish

Corrective Action

No corrective action needed

Standard 115.15 Limits to cross-gender viewing and searches

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

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.

TDCJ policy prohibits cross-gender pat searches, strip searches or cross-gender visual body cavity searches. All strip searches are authorized by a supervisor and documented. The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their buttocks, or genitalia, except when such viewing is incidental to routine checks. Staff is trained to conduct cross-gender pat-down searches, in case of an emergency, and searches of transgender and intersex inmates using the least intrusive method possible. Staff interviews showed a thorough understanding of the inmate search policy. Random inmate interviews revealed that appropriate staff is conducting searches.

Policy, Materials, Interviews and Other Evidence Reviewed

AD - 03.22 Offender Searches
 Safe Prisons PREA Plan
 Pre-Service Training - Contraband and Shakedown

SPPOM 02.05 Cross - Gender Searches and Log
Random Staff interviews
Random Inmate interviews

Corrective Action

No corrective action needed

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

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

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.

The TDCJ Beto Unit takes steps and has a policy which ensures 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. The Beto Unit provides inmates with materials which are available in English and Spanish as well as several other languages. Additionally, the facility has Spanish translators available if needed. They also have access to a translation hotline. PREA posters and educational materials are provided in English and Spanish. Inmates who are deaf are provided PREA information thru written form, i.e. PREA guidelines, Education Brochures and Videos with subtitles. Inmate who are blind or sight are provided an audio version in either English or Spanish. PREA Videos are available with subtitles. TDCJ does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise an inmate’s safety, the performance of first-responder duties, or the investigation of an inmate’s allegations.

Policy, Materials, Interviews and Other Evidence Reviewed

Intake Procedures 1.10 Initial Orientation
AD-06. 25 Qualified Interpreter Services – ASL
CMHC G-51.1 Offenders With Special Needs
SPPOM 02.03 Safe Prisons-PREA Program Postings and Brochures w-attachments
SM-05.50 Qualified Spanish Interpreters Guidelines
Safe Prisons-PREA Plan
SPPOM 03.01 Offender Assessment Screening
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

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.

The Texas Department of Criminal Justice (TDCJ) prohibits hiring and/or promoting anyone who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. TDCJ completes criminal background checks on all new employees, contract staff and volunteers before they are allowed to have contact with inmates. TDCJ policy requires that all new employees be asked whether they have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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 or been civilly or administratively adjudicated to have engaged in the activity described above.

Policy, Materials, Interviews and Other Evidence Reviewed

- PERS 598 TDCJ Job Application Supplement for Agency Applicants
- PD-75 Applicants With Pending Criminal Charges or Prior Criminal Convictions
- PD - 73 Selection Criteria For CO Applicants
- Safe Prisons PREA Plan
- Criminal Background Checks
- Warden interview
- Investigative Staff Interview
- Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.18 Upgrades to facilities and technologies

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

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.

The Texas Department of Criminal Justice (TDCJ) considers the effect of any new design, acquisition, expansion, or modification on the agency's ability to protect inmates from sexual abuse. The Beto Unit opened in 1980. There have been no additions or major modifications to the facility since the PREA standards were adopted. Protection of inmates from sexual abuse through the installation of electronic surveillance and other technology is continuously evaluated.

Policy, Materials, Interviews and Other Evidence Reviewed

- SOPM 07.02 Deletion, New Installation or Relocation of Video Surveillance Equipment
- SM-01.14 Operating and Monitoring Video Surveillance Systems

Facility Tour
Pre-Audit Questionnaire
Facility Diagrams (Camera Placement)

Corrective Action

No corrective action needed

Standard 115.21 Evidence protocol and forensic medical examinations

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

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.

The Office of Inspector General (OIG) is responsible for criminal and administrative investigations. Interviews were conducted with investigators from OIG. Interviews confirmed that PREA investigations are completed as outlined by the standards and investigators were very knowledgeable of the investigation process, evidence collection protocols, and follow-up procedures

Emergency healthcare as well as forensic examinations by SANE/SAFE staff are provided at an outside facility with no cost to the inmate. An advocate is provided to the inmate upon request to provide emotional support through the forensic medical examination and investigation interviews. There were no forensic medical exams performed by SANE/SAFE staff during the last twelve months.

Policy, Materials, Interviews and Other Evidence Reviewed

AD 16.03 Evidence Handling
Safe Prisons - PREA Plan
SPPOM 05.01 Sexual Abuse Response and Investigation w- Attachment G
OIG-04 05 Offender Sex Assault Inv.
CMHC G-57.01 Sexual Assault Sexual Abuse
Rape Advocacy Centers
SPPOM 02.02 Offender Victim Representative
Investigative Staff Interview
Medical Staff Interview

Corrective Action

No corrective action needed

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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.

The Texas Department of Criminal Justice (TDCJ) has policies which require that all allegations of sexual abuse and sexual harassment be referred for investigation. The Office of Inspector General (OIG) is tasked with conducting these investigations. The Department works with the OIG to investigate reports of Staff-on-Inmate and Inmate-on-Inmate sexual assault that may involve criminal charges. All allegations are investigated and reported with findings as required by this standard. Documentation of the administrative investigation is maintained by the OIG and outcomes are shared with the Warden and other appropriate staff. Interviews conducted with investigators from the OIG demonstrated a significant understanding of their responsibilities and the responsibilities. The roles and responsibilities of each department are clearly defined in policy. The agency’s policy is available on the TDCJ website.

Policy, Materials, Interviews and Other Evidence Reviewed

- AD-02.15 Operations of The Emergency Action Center And Reporting Procedures For Serious Or Unusual Incidents
- Safe Prisons PREA
- SPPOM 05.05 Completing the Offender Protection Investigation
- SPPOM 05.01 Sexual Abuse Response and Investigation
- AD-16.20 Reporting Incidents Crimes to the Office of the Inspector General
- PD-29 Sexual Misconduct with Offenders
- Warden Interview
- Investigative Staff Interview
- Random Staff Interviews
- Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.31 Employee training

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

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.

TDCJ’s training for staff pertaining to sexual abuse prevention and reporting predates the PREA requirements. PREA training addresses all requirements including their zero tolerance policy, the agency’s policy and procedures for prevention, reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting, common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates, and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

This training is required for all employees during their first year of employment. Refresher is provided to staff on an annual basis. During interviews, officers were very aware of their responsibilities to protect victims, respond to allegations and refer reports for further investigation. Each officer is provided a pocket card identifying the steps to take as a first responder and how to report to the Office of Inspector General.

Policy, Materials, Interviews and Other Evidence Reviewed

CTSD Pre-Service Training Block 1 Safe Prisons
CTSD Safe Prisons PREA Program Inservice Curriculum
Safe Prisons PREA in Texas - Video Script
AD 12.20 Implementation & Operation of the TDCJ In-Service Program
Safe Prisons PREA Plan
SPPOM 06.01 Unit Safe Prisons PREA Program Awareness Training
Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.32 Volunteer and contractor training

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

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All contractors and volunteers who have contact with inmates at the Beto Unit receive PREA training prior to working in the facility. Orientation includes the agency’s policy and procedures regarding sexual abuse and sexual harassment prevention, detention, reporting, and response including zero tolerance. Orientation is documented and maintained by the facility.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons PREA Plan
SPPOM 06.01 Unit Safe Prisons PREA Program Awareness Training
Letter Of Orientation For Special Volunteers
Volunteer Services Training
Contract Staff Interview
Volunteer Interview

Corrective Action

No corrective action needed

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

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.

The Texas Department of Criminal Justice (TDCJ) provides PREA education to all inmates beginning at intake into the agency. At reception, inmates are provided a PREA pamphlet and inmate handbook which explains the agency’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents. When receiving inmates at the facility, PREA/SAFE Prison Officers covers the PREA information with the inmate. The inmate also receives materials that include PREA information. These materials cover the agency’s zero tolerance policy and how to report incidents. During their incarceration inmates receive a peer led comprehensive education in a classroom setting. Inmate education is documented for each inmate and maintained in the inmates file. Random inmate interviews confirm they have received PREA information at intake and during orientation at the facility. Additionally, PREA information is posted in all housing and common areas.

Policy, Materials, Interviews and Other Evidence Reviewed

- UCPM - 05.00 Unit Orientation Procedures with Attachments
- SPPOM 06.02 with Attachment Q
- Offender Orientation Handbook
- Offender Video Instruction Letter
- IPM 01.10 Initial Orientation
- AD-04.25 Language Assistance Services to Offender Identified As Monolingual Spanish - Speaking
- Warden Interview
- SAFE Prisons Interview
- Random Staff Interviews
- Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.34 Specialized training: Investigations

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

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TDCJ-OIG investigators receive specialized training to conduct sexual abuse investigations in confinement settings. This training includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. Investigators are required to complete annual mandatory training for

investigations. Specialized training was verified through the investigator interviews and training records.

Policy, Materials, Interviews and Other Evidence Reviewed

- 115.34 (a) BP-01.07 Inspector General Policy Statement
- 115.34 (a, b)CTSD Safe Prisons PREA Investigation Training
- 115.34 (a, c) OIG OPM 02.15 Training Procedures
- 115.34 (a,b) OIG LP3201 - Sexual Assault Investigative Topics
- 115.34 (a,c) PD-97 Training and Staff Development
- 115.34 (c) OIG Roster NIC PREA Training
- OIG-Investigator Interview

Corrective Action

No corrective action needed

Standard 115.35 Specialized training: Medical and mental health care

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

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The Texas Department of Criminal Justice (TDCJ) requires that all full and part-time medical and mental health care practitioners complete specialized training. The training curriculum includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and who to report allegations or suspicions of sexual abuse and sexual harassment. Interviews with healthcare staff demonstrated they understood how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and who to report allegations or suspicions of sexual abuse and sexual harassment. The facility’s healthcare practitioners do not conduct forensic medical exams. Emergency medical healthcare, along with forensic examinations by SANE/SAFE staff, are provided at an outside hospital facility with no cost to the inmate.

Policy, Materials, Interviews and Other Evidence Reviewed

- Letter of Orientation TDCJ Health Services Division Students Trainees
- Medical and Mental Health Orientation Checklist
- AD-16.03 Evidence Handling
- CMHC C-19.1 Continuing Education-Staff Development
- CMHC C-25.1 Orientation Training for Health Services Staff
- PD - 97 Training and Staff Development
- Statement of Fact - Forensic Exams
- Medical/Mental Health Staff Interviews

Corrective Action

No corrective action needed

Standard 115.41 Screening for risk of victimization and abusiveness

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

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The Texas Department of Criminal Justice (TDCJ) screens all inmates for risk of victimization and abusiveness upon arrival. The screening is completed by PREA/SAFE Prisons within the first couple hours of arrival. The screening instrument includes whether the inmate has a mental, physical, or developmental disability, the age and physical build of the inmate, previously incarceration history, whether the inmate's criminal history is exclusively nonviolent, prior convictions for sex offenses, whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, past sexual victimization, self-perception of vulnerability and civil immigration status.

Within the first thirty (30) days of arrival at the facility, staff reassesses the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Inmates are not disciplined for refusing answer questions during the screening process. Information obtained during the initial assessment and reassessment is placed in the inmate's classification file. Only authorized staff has access to these files.

Policy, Materials, Interviews and Other Evidence Reviewed

SPPOM-03.01 Offender Assessment Screening
Safe Prisons PREA Plan
CMHC E-35.1 Mental Health Appraisal for Incoming Offenders
CMHC A-09.01 Privacy of Care
SPPOM_0301_Attachment_E
IPM-CL-69 Psychological Screening Interview
IPM-5.06 Intake Procedure Security Referrals
SAFE Prison Staff Interviews
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No Corrective Action Needed

Standard 115.42 Use of screening information

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

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.

The Texas Department of Criminal Justice (TDCJ) uses information from the risk assessment to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The Beto Unit makes individualized determinations about how to ensure the safety of each inmate.

Transgender or intersex inmate's housing is considered on a case-by-case basis, placement considers the inmate's health and safety, and whether the placement would present management or security problems. Transgender or intersex inmate's placement is reassessed as needed.

Transgender or intersex inmate's own view with respect to his or her own safety is given consideration.

Transgender and intersex inmates are given the opportunity to shower separately from other inmates.

The Beto Unit does not place lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated unit based solely on identification or status.

Policy, Materials, Interviews and Other Evidence Reviewed

SPPOM-03.01 Offender Assessment Screening
Safe Prisons PREA Plan
CMHC E-35.1 Mental Health Appraisal for Incoming Offenders
CMHC A-09.01 Privacy of Care
SPPOM_0301_Attachment_E
IPM-CL-69 Psychological Screening Interview
IPM-5.06 Intake Procedure Security Referrals
SAFE Prison Staff Interviews
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.43 Protective custody

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

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.

TDCJ policy on protective custody prohibits the placement of inmates at high risk for sexual victimization in the 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 an involuntary segregated housing placement is made the placement is review on a weekly basis until other housing can be found. Segregated housing assignment will not exceed a period of thirty (30) days. Inmates placed in

protective custody shall have access to programs privileges, education, and work opportunities to the extent possible. If restrictions occur, the facility documents the restrictions, duration of the limitation, and reasons for the limitation. The George Beto Unit did not report any inmates on protective custody status for reporting sexual abuse.

Policy, Materials, Interviews and Other Evidence Reviewed

Protective Safe Keeping Plan w attachments
Safe Prisons PREA Plan
SAFE Prison Staff Interviews
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.51 Inmate reporting

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

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.

The Texas Department of Criminal Justice (TDCJ) has procedures which allow for multiple internal and external ways for inmates to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are shared with inmates at intake, during orientation, in the PREA brochure, and on posters throughout the facility. TDCJ Inmates may report allegations through a third party or send an anonymous report. The inmates may also use a toll free hotline (800-535-0283) to report sexual abuse. Inmate interviews indicated they were comfortable reporting sexual abuse or sexual harassment and they knew the different methods available for reporting. Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of inmates.

Policy, Materials, Interviews and Other Evidence Reviewed

BP-03.91 Uniform Offender Correspondence Rules
Safe Prisons PREA Plan
SPPOM_0203_Attachment_A
AD - 14.09 Postage and Correspondence Supplies
ED - 02.10 PREA Complaints and Inquiries
Offender Orientation Handbook (English & Spanish)
TBCJ PREA Brochure
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.52 Exhaustion of administrative remedies

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

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.

The Beto Unit does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual assault/abuse. TDCJ does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual assault/abuse. The Beto Unit ensures that an inmate who alleges sexual assault/abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. TDCJ issues a final decision on the merits of any portion of a grievance alleging sexual assault/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. TDCJ may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The Beto Unit notifies the inmate in writing of any such extension and provides a date by which a decision will be made. 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, the inmate may consider the absence of a response to be a denial at that level. Inmates may be disciplined for filing a false grievance related to alleged sexual assault/abuse only where the agency demonstrates that the inmate filed the grievance in bad faith. An inmate is not punished for reporting sexual assault/abuse in cases where the allegation is substantiated or unsubstantiated, as there is no proof in these cases that the alleged sexual violence did not happen. For unfounded allegations, a determination of bad faith should be driven by the particular factors of the case. The Warden will consider the totality of circumstances and all the facts together to determine if an inmate was intentionally making a report or allegation that he or she knew was false.

Policy, Materials, Interviews and Other Evidence Reviewed

- BP-03.77 Offender Grievances
- Safe Prison-PREA Plan
- OGOM Appendix B Instructions on How to Write and Submit Grievances
- Offender Grievance (Sexual Assault Abuse)
- OGOM 1.01 Step 1 Grievances
- OGOM Appendix U - Third Party Preliminary Investigation Form

Corrective Action

No corrective action needed

Standard 115.53 Inmate access to outside confidential support services

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

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.

TDCJ provides access to victim advocates for emotional support services through a hotline and mailing addresses. Inmates can write the Office of Inspector General confidentially and remain anonymous upon request. Inmates are allowed to write rape crisis programs free of charge. Correspondence to rape crisis programs is processed as privileged mail. The TDCJ has an agreement with the Texas Association Against Sexual Assault (TAASA) for victim advocate services. This information is posted in all housing areas near the inmate phones. Staff and inmates were aware of available services.

Policy, Materials, Interviews and Other Evidence Reviewed

- BP-03.77 Offender Grievances
- Safe Prison-PREA Plan
- OGOM Appendix B Instructions on How to Write and Submit Grievances
- Offender Grievance (Sexual Assault Abuse)
- OGOM 1.01 Step 1 Grievances
- OGOM Appendix U - Third Party Preliminary Investigation Form
- Texas Association Against Sexual Assault (TAASA)
- SAFE Prisons Interview
- Random Staff Interviews
- Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.54 Third-party reporting

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

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.

The TDCJ website provides a link to the PREA Ombudsman Office as a method for third party reporting of sexual abuse and sexual harassment. The website encourages family members and the public to report allegations of sexual abuse to the facility immediately. Third party reporting information is provided on the website and in inmate brochures, pamphlets, and handouts.

Policy, Materials, Interviews and Other Evidence Reviewed

- ED-02.03 Ombudsman Program
- ED-02.10 PREA Complaints and Inquiries
- General Information Guide for Families of Offenders
- Offender Orientation Handbook (English & Spanish)
- Safe Prisons PREA Plan
- SPPOM 04.02 Receiving Allegations of Sexual Abuse from an Outside Agency

Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.61 Staff and agency reporting duties

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

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.

TDCJ Beto Unit policy requires all staff to immediately report and document sexual abuse and sexual harassment, including third-party and anonymous reports. Staff is prohibited from discussing information related to sexual abuse reports with anyone other than those directly involved. Medical staff is required to report sexual abuse and harassment. During the initial medical screening, medical staff notifies inmates of their duty to report and limits to confidentiality.

Policy, Materials, Interviews and Other Evidence Reviewed

ED-02.03 Ombudsman Program
ED-02.10 PREA Complaints and Inquiries
AD 16.20 Reporting Incidents Crimes to the Office of the Inspector General
Safe Prisons PREA Plan
SPPOM 04.02 Receiving Allegations of Sexual Abuse from an Outside Agency
OIG Investigator Interview
Medical Staff Interview
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.62 Agency protection duties

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

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.

TDCJ policy requires staff to take immediate action to protect any inmate subject to substantial risk of sexual abuse. Policies outline the immediate steps that are to be taken to protect inmates with a substantial risk of sexual abuse. Inmates at risk are immediately removed from the area and placed in a safe location. Staff interviews showed a thorough understanding of the steps needed to protect an inmate at risk for sexual abuse. The Beto Unit has not had any reports of an inmate who was at substantial risk of imminent sexual abuse during the 12 months prior to the audit.

Policy, Materials, Interviews and Other Evidence Reviewed

AD-02.15 Operation of the EAC & Reporting Procedures for Serious or Unusual Incidents
Safe Prisons-PREA Plan
SPPOM 05.01 Sexual Abuse Response and Investigation
SPPOM 05.03 Time Frames Associated with Offender Protection Investigations
SAFE Prisons Interview
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.63 Reporting to other confinement facilities

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

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.

TDCJ policy require upon receiving an allegation that an inmate was sexually abused while confined at another facility, that the Warden of the facility that received the inmate must notify the head of the facility where the sexual abuse is alleged to have occurred within 72 hours. The facility must also notify the Office of Inspector General. The Beto Unit has not received any reports of sexual abuse from other facilities regarding incidents at Beto during the past 12 months.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons-PREA Plan
SPPOM 05.01 Sexual Abuse Response and Investigation
SPPOM 05.03 Time Frames Associated with Offender Protection Investigations
SAFE Prisons Interview
Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)

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

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.

The TDCJ Beto Unit has a policy and provides training to all first responders which include the separation of the alleged victim and abuser; preservation and protection of the crime scene until appropriate steps can be taken to collect evidence; the collection of physical evidence, requesting 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; and ensuring that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Staff is very knowledgeable of their responsibilities when responding to reports of sexual abuse.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons-PREA Plan
 SPPOM 05.01 Sexual Abuse Response and Investigation
 SPPOM 05.03 Time Frames Associated with Offender Protection Investigations
 SAFE Prisons Interview
 Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.65 Coordinated response

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

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.

The TDCJ Beto Unit has a written coordinated response plan to address Incident of inmate sexual abuse. The plan coordinates actions taken in response to an incident of sexual abuse among first responders, security, medical and mental health practitioners, Office of Inspector General, facility administration, and victim advocates. A checklist is utilized to ensure all process steps are completed and notifications are made.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons-PREA Plan
 SPPOM 05.01 Sexual Abuse Response and Investigation
 SAFE Prisons Interview
 Random Staff Interviews

Medical Staff Interview

Corrective Action

No corrective action needed

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

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

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.

TDCJ policy allows for the removal of staff accused of sexual abuse from contact with inmates pending the outcome of an investigation. The facility may remove alleged staff sexual abusers from contact with any inmates or place an employee on administrative leave pending the outcome of an investigation.

Policy, Materials, Interviews and Other Evidence Reviewed

PD-22 General Rules of Conduct and Disciplinary Action Guidelines for Employees

PD-29 Sexual Misconduct with Offenders

PD-35 Independent Dismissal Mediation and Dispute Resolution

SAFE Prisons Interview

OIG Investigative Staff Interview

Corrective Action

No corrective action needed

Standard 115.67 Agency protection against retaliation

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

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.

The TDCJ Beto Unit has policies and processes in place to protect inmates and staff that report sexual abuse and harassment. The PREA/SAFE Prisons unit is responsible for this process. Those that report are monitored for at least ninety (90) days. Monitoring includes any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. TDCJ policy allows the monitoring period to be continued as needed. There was one inmate being monitored at the time of the onsite visit. Monitoring does continue upon transfer to another facility.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons-PREA Plan
SPPOM 05.01 Sexual Abuse Response and Investigation
SPPOM 05.03 Time Frames Associated with Offender Protection Investigations
SPPOM 05.08 90-Day Monitoring for Retaliation
SAFE Prisons Interview
Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.68 Post-allegation protective custody

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

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.

The TDCJ Beto Unit may use segregated housing to protect those that report sexual abuse. Victims placed in protective custody are monitored and seen by medical and mental health. Placement is reviewed within twenty-four hours and again within thirty days. Alternative housing is generally found within thirty days of placement. The Beto Unit documents any restriction or loss of privileges due to being placed in protective custody. The Beto Unit did not report any inmates on protective custody status that had reported sexual abuse or harassment.

Policy, Materials, Interviews and Other Evidence Reviewed

AD 03.50 Administrative Segregation
AD-04.63 Transient Status Offenders
Administrative Segregation Plan
ASC Review Decisions Attachment 12.00
Guidelines for Administrative Segregation Committee Members 0714
Protective Safe Keeping Plan
Safe Prisons PREA Plan
SAFE Prisons Interview
Random Staff Interviews
Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.71 Criminal and administrative agency investigations

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

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.

The Office of Inspector General (OIG) conducts investigations as outlined by the PREA Standards. Investigators receive specialized training in sexual abuse investigations pursuant to Standard 115.34. When evidence appears to support criminal prosecution, the OIG conducts interviews only after consulting with prosecutors whether interviews may hinder subsequent criminal prosecution. Administrative investigations include an effort to determine whether staff actions or failures contributed to the abuse and are documented in written reports. Criminal investigations are also documented in a written report that contains a description of all evidence. Substantiated allegations of conduct that appears to be criminal are referred for prosecution and written reports are saved for a minimum of 7 years.

Policy, Materials, Interviews and Other Evidence Reviewed

AD - 02.15 Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents
Safe Prisons-PREA Plan
CTSD Safe Prisons PREA Investigation Training
OIG 04.05 Offender Sexual Assault Investigations
BP 01.07 Inspector General Policy Statement
SAFE Prisons Interview
OIG-Investigative Staff Interview

Corrective Action

No corrective action needed.

Standard 115.72 Evidentiary standard for administrative investigations

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

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.

Interviews with investigative staff indicate that TDCJ imposes a standard of preponderance of evidence for proof, or a lower standard, when determining whether allegations of sexual abuse or sexual harassment are substantiated. Investigation reports provided additional support further demonstrating compliance with this PREA standard.

Policy, Materials, Interviews and Other Evidence Reviewed

AD - 02.15 Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents
Safe Prisons-PREA Plan
CTSD Safe Prisons PREA Investigation Training
OIG 04.05 Offender Sexual Assault Investigations
BP 01.07 Inspector General Policy Statement

SAFE Prisons Interview
OIG-Investigative Staff Interview

Corrective Action

No corrective action needed

Standard 115.73 Reporting to inmates

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

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.

The Office of Inspector General (OIG) has a process in place to notify the inmate upon close out of an investigation, which will indicated substantiated, unsubstantiated, or unfounded. The OIG investigator will notify the inmate directly in cases of substantiated or unsubstantiated cases and record it in the case file. Unfounded investigations are sent to the inmate’s facility and provided to the inmate via the legal mail.

Policy, Materials, Interviews and Other Evidence Reviewed

Agency Demonstration -Reporting to Offenders
Safe Prisons PREA Plan
SPPOM-05.05 Attachment M UCC Notification of OPI Outcome
SPPOM-05.11 Attachment F Staff-on-Offender Sexual Abuse Investigation
SPPOM-05.10 Reporting Sexual Abuse Criminal Case Status to Offenders
SAFE Prisons Interview
OIG Investigative Staff Interview

Corrective Action

No corrective action needed

Standard 115.76 Disciplinary sanctions for staff

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

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.

TDCJ policy addresses disciplinary sanctions of employees up to removal for PREA related issues. The employee manual provided to all employees explains the disciplinary process to them. The Beto Unit has not had any incidents of employee suspensions, or termination for issues of

sexual abuse or sexual harassment. Staff interviews revealed an awareness of the departments zero tolerance policy as it pertains to sexual abuse and sexual harassment.

Policy, Materials, Interviews and Other Evidence Reviewed

WBP-07.15 Sexual Misconduct with Offenders

WBP-07.44 Professional Standards of Conduct and Disciplinary Guidelines

AD 16.20 Reporting Incidents Crimes to the Office of the Inspector General

PD-22 General Rules of Conduct and Disciplinary Action Guidelines for Employees

PD-29 Sexual Misconduct with Offenders

SAFE Prisons Interview

Random Staff Interviews

Corrective Action

No corrective action needed

Standard 115.77 Corrective action for contractors and volunteers

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

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.

TDCJ has a zero tolerance involving sexual abuse and sexual harassment of inmate by contractors and volunteer. The policy outlines criminal actions taken in the event a volunteer or contractor sexual abuses or participates in sexual harassment. Interviews of contract staff and volunteers showed an awareness of this policy. The Beto Unit has not had any reported incidents of a contractor or volunteer who has engaged in sexual abuse of an inmate.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons PREA Plan

Volunteer Services Plan

Volunteer Training Facilitators Guide

Acknowledgment of Volunteer Training Orientation

Chaplaincy Manual 13.03 Ecclesiastical Endorsements

PD-29 Sexual Misconduct with Offenders

Medical Staff Interview

Volunteer Interviews

Corrective Action

No corrective action needed

Standard 115.78 Disciplinary sanctions for inmates

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

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.

TDCJ policy outlines disciplinary sanctions that may be imposed on inmates who engage in sexual abuse and sexual harassment. Inmates are subject to discipline internally for inmate on inmate sexual abuse. Inmates are only disciplined for sexual relations with staff in cases where it is determined to be without consent from staff.

Policy, Materials, Interviews and Other Evidence Reviewed

Safe Prisons PREA Plan
Disciplinary Rules and Procedures for Offenders
CMHC Policy E-35.1 Mental Health Appraisal for Incoming Offenders
SOTP 01.01 Overview of the Sex Offender Treatment Program
Random Staff Interviews
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.81 Medical and mental health screenings; history of sexual abuse

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

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.

The Beto Unit medical staff conducts medical screenings upon intake which are followed up by medical staff within fourteen days of the offender’s arrival at the facility. Information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to medical and mental health practitioners and other select staff, informed consent is obtained before information is shared with additional staff.

Policy, Materials, Interviews and Other Evidence Reviewed

CMHC Policy E-35.1 Mental Health Appraisal for Incoming Offenders
Safe Prisons PREA Plan
SPPOM_0301_Attachment_E
CMHC Policy E-35.2 Mental Health Evaluation
CMHC Policy G-57.1 Sexual Assault Sexual Abuse
CMHC H-61.1 Confidentiality and Release Protected Health Information
Medical Staff interview
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.82 Access to emergency medical and mental health services

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

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.

The TDCJ Beto Unit has a protocol in place to transport a victim of sexual abuse to an outside hospital with SANE/SAFE certified staff for medical examined if required. The Beto Unit also has processes in place to provide emergency prophylactic medications if deemed appropriate by medical staff in consultation with the inmate. The Beto Unit had no incidents that required an inmate being transported to a SANE/SAFE certified hospital for a medical examination in the past year.

Policy, Materials, Interviews and Other Evidence Reviewed

CMHC Policy E-35.1 Mental Health Appraisal for Incoming Offenders
Safe Prisons PREA Plan
SPPOM_0301_Attachment_E
CMHC Policy E-35.2 Mental Health Evaluation
CMHC Policy G-57.1 Sexual Assault Sexual Abuse
CMHC H-61.1 Confidentiality and Release Protected Health Information
Medical Staff interview
Random Inmate Interviews

Corrective Action

No corrective action needed

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

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

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.

TDCJ has protocols in place to provide ongoing medical and mental health care of inmates who claim sexual abuse. Medical staff interviewed was well versed in the emergency protocol to follow with sexual abuse victims. The Beto Unit did not have a need for ongoing medical or mental health care for sexual abuse victims and abusers within the twelve months prior to the audit.

Policy, Materials, Interviews and Other Evidence Reviewed

CMHC Policy E-35.1 Mental Health Appraisal for Incoming Offenders
Safe Prisons PREA Plan
SPPOM_0301_Attachment_E
CMHC Policy E-35.2 Mental Health Evaluation
CMHC Policy G-57.1 Sexual Assault Sexual Abuse
CMHC H-61.1 Confidentiality and Release Protected Health Information
SAFE Prisons Interview
Medical Staff interview
Random Inmate Interviews

Corrective Action

No corrective action needed

Standard 115.86 Sexual abuse incident reviews

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

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.

TDCJ policy requires a sexual abuse incident review be conducted within 30 days of the conclusion of investigations, unless the allegation is determined to be unfounded. The review team consists of the PREA Compliance Manager, security staff and a third member designated by the warden. The incident review team reviews the circumstances of the incident; the inmates and staff involved, whether actions taken were consistent with agency policies and procedures, if allegation or investigation indicates a need for policy changes and whether the incident or allegation were motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affliction. The report is completed and submitted to the Warden for review and forwarded to the regional Office.

Policy, Materials, Interviews and Other Evidence Reviewed

AD-02.15 Operations of the EAC and Reporting Procedures for Serious or Unusual Incidents
Instructions for Reporting Alleged Sexual Abuse and Sexual Harassment
Safe Prisons PREA Plan
SAFE Prisons Interview

Corrective Action

No corrective action needed

Standard 115.87 Data collection

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

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.

The TDCJ Beto Unit collects accurate, uniform data for every allegation of sexual abuse at the facility using a standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually. The data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. TDCJ reviews and collects data as needed from all available documents, including reports, investigation files, and sexual abuse incident reviews. The Beto Unit does not contract its inmates to other facilities. TDCJ provides all data from the previous calendar year to the Department of Justice upon request.

Policy, Materials, Interviews and Other Evidence Reviewed

- SPPOM-08.01 Monthly Safe Prisons PREA Report
- SPPOM 01.01 Safe Prisons PREA Management Office
- Safe Prisons PREA Plan
- BP-02.09 Prison Rape Elimination Act Ombudsman Policy Statement
- OIG 04.05 Offender Sexual Assault Investigations
- AD-02.15 Operations of the EAC and Reporting Procedures
- SAFE Prisons Interview

Corrective Action

No corrective action needed

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)

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.

TDCJ collects aggregated data throughout the agency. An annual report is prepared which includes identification of problem areas, corrective action for each facility, and the agency as a whole. The annual report includes a comparison of the current year’s data and corrective actions with prior years and provides an assessment of progress in addressing sexual abuse. Before publishing the annual report, the agency removes all personal identifiers. The annual report is made available to the public through the agency’s website. TDCJ’s Annual Report on Sexual Victimization is available for review on the agency’s website.

Policy, Materials, Interviews and Other Evidence Reviewed

- SPPOM-08.01 Monthly Safe Prisons PREA Report
- SPPOM 01.01 Safe Prisons PREA Management Office
- Safe Prisons PREA Plan
- BP-02.09 Prison Rape Elimination Act Ombudsman Policy Statement
- OIG 04.05 Offender Sexual Assault Investigations
- AD-02.15 Operations of the EAC and Reporting Procedures

Corrective Action

No corrective action needed

Standard 115.89 Data storage, publication, and destruction

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

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.

The TDCJ annual report includes: identification of problem areas, corrective action for each facility, and the agency as a whole, a comparison of the current year’s data and corrective actions with those from prior years, and provides an assessment of progress in addressing sexual abuse. TDCJ data is retained and secured by Office of Inspector General. All personal identifiers are removed before the report is published. The annual report is made available to the public through the TDCJ website.

Policy, Materials, Interviews and Other Evidence Reviewed

- SPPOM-08.01 Monthly Safe Prisons PREA Report
- SPPOM 01.01 Safe Prisons PREA Management Office
- Safe Prisons PREA Plan
- BP-02.09 Prison Rape Elimination Act Ombudsman Policy Statement
- OIG 04.05 Offender Sexual Assault Investigations
- AD-02.15 Operations of the EAC and Reporting Procedures
- SAFE Prisons Interview

Corrective Action

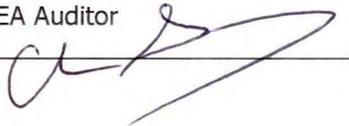
No corrective action needed

AUDITOR CERTIFICATION

I certify that:

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

Chris Sweney, Certified PREA Auditor



Auditor Signature

11/08/2017

Date