

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: February 28, 2016

Auditor Information			
Auditor name: Thomas Eisenschmidt			
Address: 26 Waterford Lane, Auburn, New York 13021			
Email: tome8689@yahoo.com			
Telephone number: 315-730-7980			
Date of facility visit: February 3-5, 2016			
Facility name: Clemens Unit			
Facility physical address: 11034 Hwy. 36 Brazoria, Texas 77422			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: 979-798-2188			
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: Cornelius Smith, Senior Warden			
Number of staff assigned to the facility in the last 12 months: 313			
Designed facility capacity: 1215			
Current population of facility: 1100			
Facility security levels/inmate custody levels: Medium - Minimum(G1 - G4), Youthful Offenders			
Age range of the population: 17-80 years			
Name of PREA Compliance Manager: Patricia Collier		Title: Unit Safe Prisons PREA Manager	
Email address: Patricia.Collier@tdcj.texas.gov		Telephone number: 979-798-2188	
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, Texas 77320			
Mailing address: <i>(if different from above)</i> P.O. Box 99, Huntsville Texas, 77342			
Telephone number: 936-295-6371			
Name: Brad Livingston		Title: Executive Director	
Email address: Brad.Livingston@TDCJ.texas.gov		Telephone number: 936-437-2101	
Name: William Stephens		Title: Director, Correctional Institutions Division	
Email address: William.Stephens@TDCJ.texas.gov		Telephone number: 936-437-2170	

AUDIT FINDINGS

NARRATIVE

The Clemens Unit PREA documents we received approximately 30 days prior to the audit. The actual site visit was conducted February 3-5, 2016. The entrance briefing for the PREA audit was conducted in the office of Warden Smith and once that was completed the tour of the main facility and trusty Camp began. A list of random inmates from each of the housing units, inmates disclosing prior victimization, inmates reporting allegations of sexual assault, youthful offender inmates, and inmates identifying as LGBTI were also interviewed. This number totaled 20 inmates.

Once the inmate interviews were completed the specialized staff interviews were conducted. They included the following staff: Health Care Administrator, Human Recourses, Mid-Level Supervisor, Intake Staff, Risk of Victimization Assessment, Mental Health, Segregation Supervisor, Retaliation Monitor, Incident Review Team Member, Unit Safe Prisons/PREA Manager, Facility Investigator, OIG Investigator and the Warden. The Agency Director, The Agency PREA Manager and the Agency Contract Manager were all interviewed by another PREA Certified Auditor prior to this audit. The auditor found the staff to be well aware of PREA and their responsibilities.

Training records for all required staff training were verified as were additional trainings verified for the Investigator, Medical and Mental Health full and part time staff, and the 2 facility victim support staff.

Nine (9) investigations of alleged sexual abuse were reviewed. Six (6) were staff on offender allegations: one was unfounded and five (5) were unsubstantiated. There were three offender on offender sexual abuse allegations: two unsubstantiated and one unfounded.

The audit notification and contact information was posted throughout the facility alerting offenders and staff of the audit dates and times. The auditor heard no concerns about any cases from the offenders during the site visit, during his tour of the facility or during random interviews of offenders. The auditor did not receive any letters, confidential or otherwise from any offender prior to or during the site visit.

At the conclusion of the site visit at the Clemens Unit the auditor met with Warden Smith and his Executive Staff. The auditor let those in attendance know that he could not give them a specific outcome at this point but did leave them with some preliminary findings. He thanked everyone for their obvious hard work and asked them to continue their commitment to ensure compliance to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Clemens Unit is a large agriculture unit that encompasses approximately 8,008 acres of prime farm land in Brazoria County, Texas. The unit is located on Texas Highway 36 approximately five miles east of the City of Brazoria and seven miles from the City of Lake Jackson. The Clemens Unit lies between the Brazos River to the north and the San Bernard River to the south. The Clemens Unit is the oldest continuously operated facility in the State of Texas. The Clemens Unit houses offenders with custody levels G1 through G4 and is home to the male youthful offender C.O.U.R.A.G.E. Program. These youthful offenders have been adjudicated as adults for the crimes they have committed, but are still under the age of 18. There were 57 youthful offenders during the audit. Inside housing units include the cellblock which is four stories tall with 23 two-man cells on each row. In the building known as the "Old Building" there is a series of six living areas known as "Tanks" which are partitioned dormitories. The capacity for this area is 281. Nine Tank is the other general housing unit inside the compound. It is a 40-man unit located toward the rear of the building. The administrative segregation unit constructed in 1975 is located off the main corridor and is a two-story sub-level building with 19 one man cells. The trusty camp complex was built in the mid-1980's and consisted of two dormitories, a dayroom area, craft shop, and chapel/classroom in a third building between the two dormitories, an administration building, and kitchen/dining room building. The third dormitory was completed in 1999. Each dormitory can house 107 offenders. The agricultural department supervises the beef cattle operation, edible crops, field crops, security horses, K-9 tracking program, and a swine finishing operation

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded: 2

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 0

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 Safe Prisons PREA Plan is the Texas Department of Criminal Justice (TDCJ) PREA specific policy for the entire agency. This policy mandates zero tolerance toward all forms of sexual abuse and sexual harassment and mandates each facility to follow these policies detailing how to prevent, detect, and respond to any such conduct. The policy goes into detail explaining to staff, volunteers, contractors and offenders specific prohibitive conduct, training requirements, reporting requirements, investigative process and consequences for violations to these policies. During informal and formal interviews staff and offenders were well aware of the policy.

William Stephens, Director Correctional Institutions Division is the PREA Coordinator for the agency. He has direct access to the agency Executive Director and meets regularly to discuss PREA matters with him. His interview, conducted by PREA auditor Jeffrey Noble, also indicated he has an understanding of the PREA standards and the audit process. He acknowledged that he has sufficient time to dedicate to his responsibilities ensuring PREA standards are followed and concerns in the field are addressed appropriately.

Patricia Collier has the position of Unit Safe Prisons PREA Compliance Manager at the Clemens Unit. She was very helpful and very knowledgeable of the standards and the audit process. During her interview she confirmed that he has direct access to the Warden Smith with anything PREA related. She also indicated she has sufficient time to perform all her PREA duties.

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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The agency does contract with other entities for the confinement of offenders and has a contract monitor. PREA auditor Jeffrey Noble interviewed the Agency Contract Manager. The contracts were discussed and reviewed to ensure the private facilities adopted and complied with PREA standards, and provided for monitoring compliance with PREA standards.

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)
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The Clemens Unit has a facility specific staffing plan. This plan was confirmed and discussed during the interview with Warden Smith. He indicated he receives a daily summary of the facility activities and it includes a report of staffing and any deviation. The staffing plan takes into account generally accepted detention practices, physical plant, offender population and prevalence of substantiated and unsubstantiated sexual abuse allegations. The Warden, PREA Manager and Security staff reviews this plan annually. Any and all deviations from the plan are reported when they occur to the Warden who is required to notify the Regional Office at the time of this deviation and the reason for it.

Agency Policy Safe Prisons PREA Plan requires intermediate-level and higher-level supervisors to conduct and document unannounced rounds on each shift. It prohibits staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. Intermediate and high level interviews indicated that they make rounds at random times visiting all areas in a random sequence

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 Clemens Unit is one of the TDCJ facilities that accepts youthful offenders. The agency policy prohibits these youthful offenders being placed in any housing unit in which the youthful offenders will have sight, sound, or physical contact with any adult offender through use of a shared dayroom or other common space, shower area, or sleeping quarters. Compliance to this practice was observed by this auditor during the site visit and interviews with the youthful offenders.

When these youthful offenders go to programs, services, meals and recreation, adult movement is suspended and the youthful offenders are escorted. This practice was also observed by the auditor during the site visit and during interviews with the youthful offenders.

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)

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staff of the opposite gender viewing their buttocks or genitalia. Female staff announces their presence each time they enter the offender living areas. Interviews with offenders confirmed these female staff announcements and the auditor observed female staff announcing their presence upon entering the housing units during the site visit.

Cross gender strip searches are not allowed per the Prisons PREA Plan. If a body cavity search must be done, it has to be conducted by medically trained staff person. The Safe Prison PREA Plan also prohibits staff from frisking transgender and intersex inmates for the purpose of determining genitalia status. During interviews with staff, all were well aware of the policy and this prohibition.

The auditor confirmed all staff at the Clemens Unit has received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner.

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.

TDCJ has established procedures in the Safe Prisons/PREA Plan, to provide disabled offenders 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 facility has a contract providing signing for the deaf as well as securing a contract with a service providing for all languages. The facility also provides handbooks on PREA policy and reporting in both English and Spanish to inmates. While in reception status, typically occurring on the second day after arrival, each offender views a video on the agency zero tolerance on how to report and to whom.

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)

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TDCJ has no less than ten (10) Executive Directives and Policies 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 this auditor. Prior to any employee, contractor or volunteer being hired or allowed to enter any TDCJ facility he/she receives a criminal background check. Anyone convicted of, or adjudicated of a sexual assault/abuse will not be promoted or even hired at the Clemens Unit. The facility also considers any incidents of sexual harassment prior to hiring or promoting anyone as well.

The agency conducts criminal background record checks for current employees and contractors who may have contact with offenders twice a year by the Central Office Human Resources Office in Huntsville. They are conducted on the employee birthdate and subsequent 6 month. The Clemens Unit is currently up to date with their recheck. .

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)

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There have been no substantial additions or modification to the Clemens Unit since 2012. There are currently 8 cameras located throughout the facility. Most of the facility has cameras strategically placed to provide safety to the inmates without creating privacy issue. As previously mentioned the youthful offender units are the only living areas currently employing cameras, and there are no privacy concerns. Warden Smith indicated during his interview that the Clemens Unit, at sometime in the future, will be receiving camera upgrades throughout the facility. He indicated the cameras will be placed in the areas the facility identified having blind spots. The Unit Safe Prisons PREA Manager will be part of the camera placement locations committee..

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)

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The Safe Prisons PREA Plan mandates an investigation be conducted on every allegations of sexual abuse and sexual harassment. The Clemens Unit complies with this policy and ensures that all criminal cases are referred to the Office of the Inspector General (OIG) while administrative cases are handles by facility trained investigators. The training content, for the facility investigators, was reviewed and protocols were found to follow the DOJ's Office Sexual Assault Medical Forensic Examinations publication.

Ben Taub Hospital is the local hospital that the Clemens utilizes for all forensic exams. These exams, when performed, are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) whenever possible. If SAFEs or SANEs staff is not available, a qualified medical practitioner performs the examination. There is no cost to the offender for any part of this exam or any follow up if necessary. There has been one forensic exam conducted in the last 12 months.

The facility has tried unsuccessfully to secure an advocacy group from the community without any success. The Clemens Unit has two Offender Victim Representatives (OVR) who have been screened for appropriateness to serve in this role and have received education concerning sexual assault and forensic examination issues in general. If requested by the victim, this staff advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. The auditor spoke with one of the OVR staff members at length, who confirmed her responsibilities. The auditor also verified her training.

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.

Texas Department of Criminal Justice policy AD-16.20 requires all crimes be reported and investigated by the Office of the Inspector General, which is the agency with the legal authority to conduct criminal investigations. The Safe Prisons PREA Plan, requires that an administrative investigation be completed for all allegations of sexual abuse and sexual harassment. TDCJ publishes its sexual abuse investigative policy on its website. The auditor interviewed the OIG Investigator and the facility Investigator and they each indicated they follow the Agency policy and initiate an investigation immediately upon being notified of an allegation of sexual abuse or sexual harassment.

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)

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The Clemens Unit insures every employee has been trained and understands the Safe Prisons PREA Plan. Interviews of staff demonstrated they understand the zero tolerance policy; the agency 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. Each staff member acknowledges by signature that they understand the training. Safe Prisons PREA Plan requires all staff receive annual refresher training on PREA and instead of every two years as required by the standard.

All staff carry a credit card sized “PREA Responder” card with their responsibilities outlined on it. Interviews of the random staff and general questions asked during the site visit clearly indicates each staff member understands all aspects of the Safe Prisons PREA Plan and the proper procedures to follow when responding to allegations of sexual abuse and sexual harassment.

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)

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.

All volunteers and contractors who have contact with inmates have been trained in their responsibilities under the Safe Prisons PREA Plan which include procedures regarding sexual abuse, sexual harassment, prevention, detection and response. All contractors and volunteers at the Clemens Unit receive PREA training prior to assuming their responsibilities. An interview conducted with a medical contractor detailed the training they received including the consequences for any violation of the policy.

The agency maintains documentation confirming that the volunteer/contractors understand the training they have received.

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)

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Each offender arriving at the Clemens Unit receives a Offender Orientation manual with information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment verbally, anonymously and in writing. This is signed for by the offender. In this this document it also indicates that should the offender have any questions about anything PREA to contacts the Unit Safe Prisons/PREA Manager. Every offender at the Unit has seen the Agency PREA video, in some cases three times, detailing the Agency policy on zero tolerance, and how and whom to report any allegation without fear of retaliation. Interviews conducted with the intake staff and interviews conducted with offenders confirmed that information is provided both verbally and in writing.

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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According to the Safe Prison/PREA Plan policy, administrative investigations can be handled by Sergeants or above, and overseen by the Major. Most cases are handled by a Lieutenant. Each of these supervisors has received the specialized training in addition to the general training provided to all employees. This training was provided by TDCJ certified Instructors with the lesson plan following the content of the National Institute of Correction (NIC) Training for Investigators Conducting Sexual Abuse Investigations in Confined Space. The training included techniques for interviewing sexual abuse victims, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action. The training was verified through the staff interviews and a review of the training documentation.

The Office of the Inspector General (OIG) conducts all criminal investigations within the Texas Department of Criminal Justice. This is a

separate Department within TDCJ. The auditor verified during her interview that she has received Sexual Abuse investigation training that included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for a prosecution referral

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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All the Medical and Mental Health staff currently working at the Clemens Unit has received specialized training over and above the mandatory training required of all staff. This specialized training was presented by a TDCJ SANE nurse and covered: how to detect and access signs of sexual abuse and sexual harassment, how to preserve evidence, how to respond to victims and how and to whom to report incidents of sexual abuse. Interviews with medical and mental health staff confirmed that this specialized training was received. Training records also reflect all full and part time medical and mental health staff has received this specialized training.

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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Within 72 hours, typically on the day of arrival, offenders arriving at the Clemens Unit are assessed for risk of victimization and risk of sexually abusive toward other offenders. The auditor observed the following process while at the Unit. Upon admission to the facility, the Safe Prisons PREA Manager immediately assesses the offender. She utilizes attachment E, of the SafePrisons/PREA Plan asking the prisoner: if he has a mental, physical, or developmental disability; his age; documents his physical build; asks if he has previously been incarcerated; asks if his criminal history is exclusively nonviolent; asks if he has any prior convictions for sex offenses against an adult or child; asks him if he identifies as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; and asks if he has ever experienced sexual victimization; and whether he feels vulnerable to victimization. The Safe Prisons PREA Manager also inquires if the prisoner has ever received any Safe Prisons PREA Training to ensure he is aware of the agency policy and process for reporting allegations. Should the offender disclose prior victimization or prior abuse or in any way feels vulnerable a referral is immediately sent to medical and mental health. Once the PREA manager is finished with this part of the intake she immediately walks it to the Classification Committee.

The Classification Committee is comprised of the Chief of Classification, the Major and the Deputy Warden. Prior to meeting with the prisoner the committee has reviewed the offenders entire record for any vulnerability that may have been documented in his pre sentence report or while under confinement. They also review his record for any acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing prisoners for risk of being sexually abusive. The prisoner is brought before them and they discuss his record and his completed attachment E. The Committee then assigns the prisoner his security classification and determines if he needs to be monitored because of his risk for victimization or abusiveness.

Sometime within 30 days from the prisoner's arrival at the Clemens Unit facility, the facility reassesses the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. This review was confirmed during the random offender interviews and the Safe Prisons PREA Manager, who conducts these reviews during her interview. The auditor would recommend that the Agency Policy be updated to clarify this practice found at the Clemens Unit.

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)

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The auditor interviewed members of the intake staff and classification staff to question them on how the screening form and appendix E is used to determine work/housing and education assignments. Each explained how it was used in detail considering victimization among other things. The placement of transgendered and/or intersex offenders is done only after a Central Office Review Committee has reviewed the case. Transgender/Intersex offenders receive a face-to-face review at least twice a year, as a requirement by the Safe Prisons PREA Plan, in which their program assignment, work assignment, discipline record as well as their views with respect to their safety is questioned. There were no transgendered or intersex offenders assigned to the Clemens Unit during the site visit.

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)

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The agency policy, Safe Prisons PREA Plan, prohibits the placing of offenders at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The interviews conducted with Warden Smith and a Supervisor assigned to solitary, confirmed that there has been no case where segregation was used to place offenders at high risk of victimization in the last 12 months.

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)

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The Clemens Unit provides multiple internal and external ways for offenders to report sexual abuse, sexual harassment and retaliation. Internally all offenders can report verbally and in writing to any staff member, report through the grievance system, or send an anonymous letter. Interviews of offenders, staff and review of policies, confirm these offender reporting options.

The TDCJ and the Clemens Unit provides two ways for inmates to report abuse or harassment to a public or private entity/office that is not part of their agency by utilizing the Office of the Inspector General (OIG), and the PREA Ombudsman. The OIG or PREA Ombudsman allows offenders to make reports of sexual abuse and sexual harassment to them and immediately forward the allegation to agency officials, allowing the offender to remain anonymous upon request. Reports to the PREA Ombudsman may be made confidentially. Every area that inmates have access to, have posters notifying offenders how to contact these agencies.

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)

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Agency policy OGOM 1.04 and the Safe Prisons PREA Plan, detail filing a grievance by an offender involving sexual abuse. Policies indicate there is no timeline for filing a sexual abuse grievance regardless of when the alleged incident occurred. Once a grievance is filed it is turned over to the facility investigator and handled in accordance with the Safe Prisons PREA Plan regarding investigations. The Clemens Unit has had no grievance filed alleging sexual abuse in the last 12 months

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.

related to sexual abuse. The facility provides the mailing address for this group to all offenders making an allegation of sexual abuse. All other offenders are notified, in the Offender Orientation booklet, that the address for support services is provided through the Safe Prisons PREA Manager if requested. The auditor was informed that all letters mailed out to this agency are treated, as confidential correspondence meaning the envelope is not opened. Most offenders during the random interviews were not aware of support services available in the community.

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.

TDCJ provides at least three ways in which third party reports of sexual abuse can be made on behalf of an offender. The Texas Department of Criminal Justice Ombudsman Office, The PREA Ombudsman Office and the Office of the Inspector General Office make their contact information (phone number, physical address and email address) available to the families and friends of offenders. The Agency publicly provides this information in their Guide to Families of Offenders and on their web site. As previously indicated the address of the PREA Ombudsman and office of the Inspector General is posted throughout their facility including the visiting room. Offenders interviewed verified that they were aware of how to have a report filed on their behalf

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.

The Safe Prisons PREA Plan requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than as part of the investigation. Review of investigative files with the investigator and interviews with staff and offenders verified staff immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorized to discuss the report. Interviews with offenders and staff did not reveal any incident of sexual abuse or harassment not reported.

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.

The Safe Prisons/PREA Plan policy requires that anytime the agency or facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the offender. This was confirmed in the random staff interview phase of the audit. The offender is immediately secured, supervisor notified, and Unit Safe Prison PREA Manager notified. The process was also reaffirmed during the interview with Warden Smith. He indicated that there were no reported offenders at substantial risk during the last 12 months at the Clemens Unit.

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.

The Safe Prisons PREA Plan requires the facility receiving an allegation of an offender being sexually abused while confined at another facility, notify the head of the facility or appropriate office of the agency/facility. At the Clemens Unit the Unit SAFE Prisons/PREA Manager on behalf of the Warden, would make the notification within 72 hours to the head of the facility or appropriate office of the agency where the alleged abuse occurred. The Unit SAFE Prisons/PREA Manager has a letter in writing prepared and faxed in most cases within 72 hours, sometimes even within 24 hours of the unit becoming aware of the incident.

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 Safe Prisons/PREA Plan and Clemens Unit policies clearly specify procedures to respond to an allegation of sexual abuse for both security and non-security staff. As previously noted staff carries a credit card sized laminated document outlining what procedures to follow upon any allegation of sexual abuse. All staff at the Clemens Unit was extremely knowledgeable in their PREA duties and responsibilities. The straight forward policy and commitment to PREA training has prepared the staff to properly respond. Interviews and reviews of investigations further demonstrated security and non-security staff knew what to do as the first responder to a sexual assault. Though most cases were not in a time period that allowed for collection of physical evidence; security and non-security staff interviewed specifically knew what actions could destroy physical evidence.

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 Safe Prison/PREA Plan addresses training; responding to incidents of sexual abuse; and provides responses to an alleged sexual abuse incident for first responders, medical and mental health practitioners, investigators, and facility leadership. Interviews with first responders, medical and mental health practitioners, investigators, and facility executive staff confirmed their knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities.

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.

Texas is a right to work state and does not have collective bargaining. The Agency also has not entered into any agreement with any of its workforce that limits their ability to remove alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

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 Safe Prisons PREA Plan policy appoints the Warden for staff retaliation and the Safe Prison/PREA Compliance Manager as the staff member to monitor for retaliation against offenders who reported or had been sexually abused or harassed. The Major typically monitors PREA Audit Report

staff on behalf of the Warden. The policies described procedures to be followed.

Interviews of the Warden, Major, and Safe Prison/PREA Compliance Manager and offenders; and review of documentation demonstrated retaliation was monitored. Warden Smith and the Major were very knowledgeable of their responsibilities to monitor staff.

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 Safe Prisons/PREA Plan prohibits the Clemens Unit from placing offenders in segregation for protection that alleged to have suffered sexual abuse unless no alternative is available. Interviews conducted with Warden Smith, a Special Housing Unit Supervisor and a segregation line staff member confirmed that segregation has never been used to house offenders for protection after an alleged sexual assault.

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 Safe Prisons/PREA Plan requires an investigation be conducted on every allegation of sexual abuse and sexual harassment. One of facility trained investigators is required to conduct all administrative investigations and the OIG investigator is responsible for conducting all criminal investigations. When an offender files an allegation the following process takes place.

The institution makes a phone call to the Emergency Action Center (Central Office) to report the allegation and receives a case number. Calls are immediately made to Executive Staff, Safe Prisons PREA Manager, OIG Investigator, and Facility Investigator on learning of an allegation. Each case is simultaneously examined as a criminal case and an administrative case. By policy the administrative case is handled by a trained supervisor who has 72 hours to investigate an offender against offender allegation and 10 days to investigate staff against offender allegations. The OIG, criminal investigation has no specific time frame to finish their investigation. Most times case time is predicated on lab results. The facility can come to a conclusion within its' time frame and later be changed once the OIG analyzes its' evidence. The offender is notified in writing of the investigation results. If the outcome is different on the conclusion of the criminal investigation the offenders receives the second notification. This was confirmed by the OIG Investigator.

During the interview of one of the facility investigators the auditor was informed that the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an offender or staff member

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.

The Safe Prisons/PREA plan TDCJ detailing the investigations process and interviews with the investigator and administrative staff confirm the Clemens Unit has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

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 Safe Prisons/PREA Plan requires that any offender who makes an allegation of sexual abuse in any agency facility be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The facility investigators provide a written finding to the offender.

Following an offender's allegation that a staff member has committed sexual abuse against the offender, the facility subsequently informs the offender (unless the agency has determined that the allegation is unfounded) whenever the employee is on his unit, no longer employed in the facility or if the employee was indicted or charged.

As previously mentioned an offender may be told by the facility investigator that their administrative investigation yielded one result and when lab results are received by the OIG the determination of that investigation may be different. The offender is informed if both result if the allegation is determined to be criminal.

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.

As outlined in the Safe Prisons/PREA Plan and confirmed during interviews with Clemens Unit staff, staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories

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.

The Safe Prisons Plan prohibit contractors or volunteers who engaged in sexual abuse to have contact with offenders and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Warden Smith reported that there have been no allegations of sexual abuse by contractors or volunteers. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of offenders

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.

The Safe Prisons/PREA Plan and the Agency Disciplinary Rules and Procedures for Offenders prohibit all sexual relations between offenders. Offenders found engaging in a sexual relationship receive a rules infraction. Anyone found guilty of this behavior at a disciplinary hearing receives an appropriate sanction. Sanctions are commensurate with the nature and circumstances of the abuse committed taking into account whether mental disabilities contributed. The policy was confirmed with the WardenSmith during his interview.

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 Safe Prisons/PREA plan requires medical and mental health follow-up meeting within 14 days for those offenders who experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community. Review of cases with the facility medical and mental health staff demonstrated medical and mental health screening was being conducted normally within 14 days of the intake screening. Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health staff, and other staff as required.

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.

All offender victims of sexual abuse at the Clemens Unit receive timely, unimpeded access to emergency medical treatment and crisis intervention services at Ben Taub Hospital and through the facility medical/mental health department. Offenders receive immediate access to sexually transmitted infection prophylaxis and to emergency contraception. There is no cost to the prisoner. There have been one case to date requiring a forensic exam at this Hospital.

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.

The Safe prison PREA Plan, interviews with staff and offenders and review of medical and mental health documentation demonstrate there is on-going medical and mental health care for sexual abuse victims and abusers. Treatment is at no costs to the offenders. As documented in this same policy offender victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Mental health evaluations are conducted on all known offender on offender abusers within 60 days of learning such abuse, and treatment is offered

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.

The Safe Prisons/PREA Plan requires that the Clemens Unit conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, except where the case finding was unfounded. This review takes place within 30 days of the conclusion of the investigation. The Review team looks to determine: if there is a need to change policy or practice to better prevent, detect, or respond to sexual abuse; consider if the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or if motivated or caused by other group dynamics at the facility; look at the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; review the adequacy of staffing levels in that area; assess whether monitoring technology should be deployed or augmented to supplement supervision. The committee prepares a report of its findings, based on the assessment above and forwards the report with recommendations to the Warden and Safe Prisons PREA Manager. The auditor verified in interviews conducted with the Warden, Major (Member of the Review Committee) and the Safe Prisons PREA Manager that these reviews are conducted.

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.

All sexual assault and improper sexual activity with a person in custody is documented in a case management data base. It collects accurate uniform data for every allegation of sexual abuse at each facilities under TDCJ control using a standardized instrument. The database allows them to submit the annual DOJ Survey of Sexual Violence in a timely fashion.

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.

The Safe Prisons PREA Management Office compiles a monthly report using information collected from facility reports, investigations, reviews, and statistics to analyze and evaluate trends related to sexual abuse, sexual harassment, and extortion in accordance with the Safe Prisons/PREA Operations Manual. TDCJ completes an annual internal report that targets confirmed offender on offender and staff on offender sexual abuse incidents. This report provides a comparison of incidents from year to year and is utilized to identify problem areas and formulate corrective measures in efforts of reducing future incidents of sexual abuse. The annual reports are published on the Agency web site.

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 Safe Prisons PREA Plan requires that aggregated sexual abuse data, from all TDCJ operated facilities, including privately contracted facilities, be readily available to the public at least annually, through a website. Personal identifiers and sensitive information must be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a unit, while maintaining the nature of the material. These reports were reviewed on the web page. All sexual abuse data collected shall be maintained for at least 10 years after the date of the initial collection.

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.

Thomas Eisenschmidt
Auditor Signature

February 29, 2016
Date