

**PREA AUDIT REPORT     Interim   **X** Final  
ADULT PRISONS & JAILS**

**Date of report: August 1, 2016**

<b>Auditor Information</b>			
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<b>Date of facility visit:</b> July 13 – 15, 2016			
<b>Facility Information</b>			
<b>Facility name:</b> Eastham Unit			
<b>Facility physical address:</b> 2665 Prison Road #1 Lovelady, TX 75851			
<b>Facility mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Facility telephone number:</b> 936-636-7321			
<b>The facility is:</b>	<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		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Kevin Wheat			
<b>Number of staff assigned to the facility in the last 12 months:</b> 616			
<b>Designed facility capacity:</b> 2474			
<b>Current population of facility:</b> 2395			
<b>Facility security levels/offender custody levels:</b> G1-G4, Administrative Segregation, OT (Outside Trustee),			
<b>Age range of the population:</b> <sup>Transient</sup> 21 – 79			
<b>Name of PREA Compliance Manager:</b> Susan Steel		<b>Title:</b> Unit Safe Prison PREA Manager	
<b>Email address:</b> susan.steel@tdcj.texas.gov		<b>Telephone number:</b> 936-636-7321	
<b>Agency Information</b>			
<b>Name of agency:</b> Texas Department of Criminal Justice			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> State of Texas			
<b>Physical address:</b> 861-B I-45 North, Huntsville, TX77320			
<b>Mailing address:</b> <i>(if different from above)</i> P. O. Box 99 Huntsville, TX 77342			
<b>Telephone number:</b> (936) 295-6371			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Brad Livingston		<b>Title:</b> Executive Director	
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<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Lori Davis		<b>Title:</b> Director, Correctional Institutions Division	
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## **AUDIT FINDINGS**

### **NARRATIVE**

The American Correctional Association assigned Maggie Capel and Delbert Longley to complete a PREA audit of the Eastham Unit in Lovelady, Texas. Maggie Capel was assigned as the lead auditor.

A jump drive containing the pre-audit questionnaire and supporting documentation was forwarded a few weeks before the audit. There were several phone meetings conducted prior to the audit to work out the logistics of the audit and to address several questions regarding specific standards.

The auditors arrived on Tuesday, July 12, 2016 and settled into their hotel rooms before reporting to the facility. The facility was undergoing an ACA accreditation audit from Monday, July 11, through July 13, 2016. Facility staff provided a cook-out for the auditors. This afforded the audit team time to become acquainted with the staff and to finalize the logistics of the audit. Random offenders were selected from each housing area to include one alternate. A shift roster was provided for each shift and the auditors randomly selected officers from each shift. The officer interviews changed slightly when the auditors discovered that several third shift officers were working overtime on 1<sup>st</sup> shift. In these cases, those officers were selected for interview. Security supervisors were interviewed from each shift as well as first responders.

On Wednesday morning the audit team met with:

- Richard Alford, Deputy Director
- Kevin Wheat, Warden
- Greg Vaughn, Assistant Warden
- Sharon Allen, Assistant Warden
- Cheryl Jeffcoat, Region 1 Safe Prison PREA Manager
- Susan Steel, Unit Safe Prison PREA Manager
- Christopher Ferrell, Administrative Lieutenant

The audit team discussed the schedule for the day, the history of the facility and addressed any questions or concerns. The audit continued through Friday, July 15, 2016. All areas of the facility were visited during the site visit. The facility tour was divided into two days with the second day dedicated to areas outside the perimeter fence. Interviews were conducted with employees and supervisors from all three shifts. Documentation was reviewed to include offender records, human resource records, training records, and investigations. The local hospital was contacted to verify the availability of SANE nurses for forensic exams.

Additional interviews were conducted on Wednesday and the interview team met with the Unit, Regional, and Agency Safe Prison PREA Managers to clarify questions related to the standards.

An exit interview was conducted on Friday, August 15, 2016. The following staff was in attendance:

- Kevin Wheat, Senior Warden
- Gregory Vaughn, Assistant Warden
- Sharon Allen, Assistant Warden
- Christopher Ferrall, Administrative Lieutenant

Susan Steel, Unit Safe Prison PREA Manager  
Cheryl Jeffcoat, Regional Safe Prison PREA Manager

It is recommended that the facility administration consider more frequent training for both offenders and staff. Additional signage throughout the facility would also be useful. An offender made a very good suggestion to install a soap dish on the wall in the shower areas so offenders did not have to bend over to reach the soap. A portable partition would enhance privacy in the toilet areas in the dorm housing.

Ms. Steel was contacted following the audit for additional information. The final report was completed and submitted on August 1, 2016.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Eastham Unit is located in Lovelady, Texas. The facility is located on over 12,000 acres. The facility houses only male offenders with custody levels G1-G4, Administrative Segregation, Outside Trustee, and Transient. There are no cameras in the housing areas but the warden explained that the Eastham Unit has been approved to have cameras installed in the housing area and expects the project to begin sometime this year. There was a posting on each bulletin board in the housing areas notifying the offenders of the PREA audit. There is an additional 8 X 11 posting in each housing area explaining PREA and reporting options in the event of a sexual abuse or assault.

Offender housing is primarily located off one large hallway, in a telephone pole like design. The north hall has 8 dorm style housing areas with communal toilet and sinks areas. These areas provide privacy for offenders while using the toilet facilities. Offenders are also responsible for being fully clothed when entering this area. Each offender has a designated area within the dorm separated by half walls. This allows security staff to easily view offenders but also provides privacy for the offender when changing clothing. The north hall also has four cell block housing areas. Each cell houses two offenders. A toilet and sink are provided in each cell. A large gang shower is located on the north side. Showers are only used at specified times and are supervised exclusively by male officers.

The south hall is comprised of 14 cell blocks, each with three tiers. Each cell block houses 51 offenders with one offender to a cell. Toilet and sink areas are provided in the cell. Any viewing by female staff is incidental. The shower area is in the general area of the cell block on each tier and affords privacy to the offenders. Offenders are showered individually. Recreation is located immediately adjacent to the housing unit. There are ten individual bullpens for use by one offender at a time.

There is staff offices located off of north and south halls as well as the kitchen, infirmary, commissary, and count room.

The fabric/textile shop is a large air conditioned area where offenders manufacture various textiles for use in the prison. Line of sight is good throughout this basically wide open area. This area was not observed in operation as the offenders were going to lunch. It appeared to be well managed and observation was good.

The chapel is on the second floor of the unit. A two tier stairway is taken to enter the chapel. A mirror is in the stairwell and there is a window in the staff office for direct observation to the stairway. The chapel has two restrooms at the front of the room. One restroom is for use by the offenders and one for use by staff. Staff allows one person at a time in the restrooms. A staff office is at the back of the chapel with excellent view into the chapel. An offender led service was in progress at the time of the tour.

Laundry has numerous blind spots between and behind the washers and dryers. This area most of the time has a 4 to 1 offender-to-staff ratio and multiple mirrors to enable staff to watch the blind spot areas. The office area is also elevated to enhance observation.

In the kitchen area, line of sight is very good. Staff is able to watch the kitchen work areas from an elevated office with multiple windows all the way around. The coolers and freezer are locked at all times except when staff allows offenders to enter under close supervision or escorted. The kitchen storage is well staffed by employees and offenders. This area certainly has blind spots but the shelving is elevated off the floor and shelving is organized in rows to allow ample visibility for staff

walking through the area. The storage area has two levels and is easily monitored.

The south indoor recreation area is a large open gym with elevated observation points at the north and south end. On the north end of the gym is a stool, urinal, and sink. There is a portable curtain/barrier on the outside of the restroom area for privacy when in use, while providing adequate visibility for security officers.

The craft shop area is manned by two staff, supervising two main work areas. Between the areas is a bathroom with half wall and partition to allow privacy when in use. This area has security mirrors to aid in the observation.

The visitation area is near the front entrance. The facility provides both contact and non-contact visits. There was a posting in the visitation areas notifying the offenders and visitors of the PREA audit. There is an additional 8 X 11 posting in this area explaining PREA and reporting options in the event of a sexual abuse or assault.

The trustee camp is located outside the secure perimeter fence. There are three dormitory style housing areas with half walls designating each offender's bed area. The toilet and shower areas afford privacy to the offenders.

There is a large agricultural operation at the facility to include: Cow/Calf and Heifer Development Operations, Egg Laying Operation, Farm Shop, Feed Mill and Grain Storage, Edible and Field Crops, Security Pack Canines, Swine Farrowing/Nursery/Finishing Operations. The facility also has a Garment Factory and Culinary Arts program.

## **SUMMARY OF AUDIT FINDINGS**

On July 13<sup>th</sup> through July 15<sup>th</sup>, 2016 a site visit was completed at the Eastham Unit. The final report was provided on August 1, 2016. There were no standards rated as exceeds or not met. There were two not applicable standards. One standard pertained to youthful offenders. Youthful offenders are not housed at this facility. The second not applicable standard pertained to collective bargaining. Texas is not a collective bargaining state.

Number of standards exceeded: 0.

Number of standards met: 41

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

Executive Order 3.03, SAFE Prisons /PREA Program states, the agency has zero tolerance for all forms of sexual abuse and sexual harassment. The order states the TDCJ will be vigilant in creating a safe environment for staff and offenders. The Safe Prison PREA Plan outlines the agency’s proactive approach for prevention, detection, and punishment for sexual abuse and sexual harassment. This plan includes definitions of prohibited behaviors, and sanctions for offenders, staff, volunteers, and contractors who engage in sexual abuse.

This order appoints the Director of the Correctional Institution Division as the agency-wide PREA Coordinator. The Correctional Institution Director (CID) reports directly to the Executive Director. An interview with the Correctional Institution Director, dated August 26, 2015, was reviewed. The Safe Prison PREA Manager (SPPM) reports to the Deputy Director of Management Operations, who in turn reports to the CID.

The PREA Coordinator is tasked with the development of the TDCJ SAFE Prisons/PREA program. A Safe Prison/PREA Program Office (SPPMO) has been established at the agency’s central office. This office is responsible for monitoring the incidence of offender sexual abuse and providing statistical analysis regarding the frequency of reports. The agency Safe Prison PREA Manager (SPPM) directs this office. The SPPM coordinates assists and provides technical assistance to the facilities to comply with the Safe Prison/PREA Plan. The SPPM works directly with Regional Safe Prison/PREA Managers (RSPPM). The RSPPM assists with the implementation and monitoring of the Safe Prison PREA Plan within the assigned region.

Unit Safe Prison PREA Managers are assigned to each facility. The Unit Safe Prison/PREA Manager is provided dual supervision by the facility Warden and the Regional Safe Prison/PREA Manager. The facility Warden assigned Sgt. Susan Steel to serve as the Unit Safe Prison/PREA Manager. Sgt. Steel occasionally assists with shift coverage but has sufficient time and authority to coordinate the facility’s PREA responsibilities.

The agency is in compliance with this standard.

Compliance Determined By:

Review of Executive Order 03.03 Agency Organizational Chart  
Interview of the Agency PREA Coordinator (CID)  
Safe Prison/PREA Plan  
Interview with the Unit Safe Prison/PREA Manager

**Standard 115.12 Contracting with other entities for the confinement of offenders**

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

Agency directives and policies mandate that any new contract or contract renewal for the confinement of offenders requires the adoption and compliance with TDCJ policies and procedures, which includes compliance with the PREA standards. The agency assigns a facility contract monitor to monitor compliance with all contract requirements, including the PREA standards. The contractor must also employ a PREA Manager at each facility. The agency provided an example of a standard contract with a privately managed facility. This contract included the requirement that the contractor comply with the PREA standards. There are 15 contracts for the confinement of offenders. Although the Eastham Unit is a state facility, the State of Texas does contract for the confinement of offenders.

The Agency Contract Administrator was interviewed on September 21, 2015 by auditor Jeffrey Nobles. A copy of this interview was provided to this auditor. The agency requires all completed PREA audit reports to be sent to the TDCJ. These reports are posted on the agency website.

Compliance Determined By:

Review of Interview – Contract Agency Contract Administrator  
Review of Contracts for Confinement of Offenders  
Job Description – Agency Contract Administrator  
Interview of the agency Safe Prison/PREA Manager

#### **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)

The Security Operations Office monitors and directs staffing plans and shift rosters for all facilities. Security rosters are developed from the staffing plan. The Security Operations Office is the only department authorized to make changes to the shift rosters. The Warden must request changes by submitting a request to the Security Operations Office.

The staffing plan was reviewed and reflects all budgeted positions, posts, and required coverage for each post. Positions are designated as priority one and priority two positions. All priority one positions must be manned at all times. Staff assigned to priority two positions may be reassigned as needed to staff priority one positions. In the event priority one positions cannot be filled, the Duty Officer must contact the Regional Director. A determination will be made if overtime should be authorized or other operational considerations should be implemented.

Review of agency polices and interviews with the Warden and PREA Manager confirm that the staffing plan takes into consideration generally accepted detention practices, findings of inadequacies from internal or external oversight bodies, the physical plant with emphasis on blind spots, and areas where staff or offenders may be isolated, composition of the offender population and the number and placement of supervisor staff. The plan also considers any judicial findings or findings from federal investigative agencies. There are no such findings during this audit period.

The staffing plan was predicated on the facility capacity of 2,474. The average daily population is 2,341. The staffing plan review includes a review of video monitoring, prevalence of substantiated and unsubstantiated reports of sexual abuse from the prior year, and other operational considerations. The annual reviews are coordinated through the Security Operations Office in consultation with the Regional Office and the agency PREA Manager. The staffing plan, staffing plan reviews, and shift

rosters were reviewed and reflect compliance with this provision of the standard.

The security major, captains, lieutenants, and sergeants are required to conduct unannounced rounds on each shift. These rounds are documented on the daily Building Turnout Roster. The post orders for each of these positions were reviewed and reflect this requirement. A review of turnout rosters and interviews with Security Officers and supervisors confirm that unannounced rounds are conducted and documented as required by this standard provision. The agency policy prohibits alerting other staff of unannounced rounds, commonly referred to as "jiggering".

Compliance Determined by:

Review of Administrative Directive 11.52, Security Staffing  
Security Operations Procedures Manual (SOPM) 7.02 and 8.06 Facility Staffing plan  
Annual Reviews  
Facility turnout rosters  
Interviews with the Warden, PREA staff, and Security Supervisors

**Standard 115.14 Youthful offenders**

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

Unit Classification Procedure 4.19 directs that all male youthful offenders are assigned to the Clemens and Byrd facilities. All female youthful offenders are housed at the Hilltop unit. Youthful offenders are not housed at the Eastham facility. This standard is not applicable.

Compliance Determined By:

Unit Classification procedure 1.19, Youthful Offenders  
Interviews with facility administrators and staff

**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)

Agency policy mandates that strip searches and body cavity searches must be conducted by staff of the same gender as the offender, except in extraordinary circumstances. Opposite gender strip searches must be approved by a supervisor and documented by the shift supervisor on an Interoffice Communication Form. This documentation is forwarded to the Unit Safe Prison PREA Manager. Cross gender strip searches are also documented on a Cross Gender Search Log. The PAQ indicates there were 14 cross gender strip searches conducted by female (non-medical) staff and that none of these searches were conducted for exigent circumstances. The facility Warden explained that in the past

female correctional officers attending the academy were required to strip search a male offender to demonstrate proficiency in the event the officer was required to conduct such a search in exigent circumstances. This practice was addressed in an earlier audit and has since been discontinued.

The Eastham Unit is an all-male facility. Standard provisions 115.15 (B) and (c-2) relate to female offenders and do not apply to this facility

Female staff is required to announce their presence when entering a housing area. A posting is affixed to each housing area door instructing female staff to announce their presence. Interviews with offenders and staff and observations during the tour confirmed that these announcements are made routinely. The facility post orders include instructions for opposite gender staff to announce their presence.

The Safe Prison/PREA Plan requires that correctional officers must make their best effort to afford offenders privacy when showering, performing bodily functions, and changing clothing, except in exigent circumstances.

There are three different types of housing for offenders. The south hall has housing in a cellblock design. The cellblocks are three tier individual cells with toilets inside each cell. Each tier has an individual shower. These showers afford offenders privacy. Viewing into the cell area is incidental to routine cell checks. The north hall provides both dorm style housing and cell block housing. The dorm style housing has a half wall separating each bed area. The toilet and sink areas afford privacy while the offenders are using the restroom. Offenders are required to be fully dressed when using the toilet facilities but portable partitions would enhance the privacy.

There are two large gang showers at each end of the main hall. Male officers supervise shower call. There are also half curtains that prevent viewing of offenders when they are showering and dressing. The third housing type is the trustee dorms outside of the secure perimeter fence. There are three buildings for housing offenders in the trustee camp. All of these housing areas are dorm style with half walls between each bed area. Each building has toilets and showers which provide privacy for the offenders while dressing, using the toilet, and showering.

Staff is prohibited from searching or examining a transgender or intersex offender solely to determine their gender status. The Safe Prison PREA Plan states that gender status may be determined through conversations with the offender, review of medical records, or through a private medical exam conducted by a medical practitioner. Interviews with staff confirmed that this is the practice at this facility. At the time of the site visit, there were no transgender or intersex offenders housed at the facility.

The curriculum for the pre-service training course entitled, Contraband and Shakedown was reviewed. The training addresses the proper searching of male and female offenders, as well as transgender and intersex offenders. The PAQ states 100 % of all security staff have been trained to conduct cross gender pat down searches and searches of transgender and intersex offenders.

Observations during the site visit, interviews with staff and a review of agency policies and directives confirm compliance with this standard.

Compliance Determined By:

Administrative Directive 03.22, Offender Searches  
Pre-service Curriculum entitled Contraband and Shakedown  
Post Orders  
Safe Prison PREA Plan

Observations during site visit  
Random interviews with offenders, staff, and special populations.

**Standard 115.16 Offenders with disabilities and offenders who are limited English proficient**

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

The agency has provisions to ensure all offenders have access to PREA information concerning prevention, detection, and response to sexual abuse, and sexual harassment. Offenders who are deaf or visually impaired, limited English proficient, or otherwise disabled are provided information in formats the offender can understand.

The agency provides interpretive services for Spanish speaking offenders through trained staff within the agency. To qualify to be an interpreter, staff must score at Level 4 or 5 on the Language Assessment Skills - Spanish Oral Proficiency test. If an offender speaks a language other than Spanish, the facility contacts Martha Layman who is in charge of interpreter services for the agency. The agency uses Berlitz Translation Services for interpreter services. The agency also maintains a listing of bi-lingual employees throughout the agency who speak languages other than Spanish and can assist in the event of an emergency. The medical department provides a separate interpretive service through Pacific Interpreters. During the audit non-English speaking offenders were interviewed. A trained staff interpreter for the facility provided translation during interviews with Spanish speaking offenders. The staff interpreter was quite proficient. Staff understood that offender interpreters were not allowed and confirmed they were not utilized at the facility.

Zero tolerance postings are required throughout the facility in English and Spanish. At a minimum, this information must be posted in the following areas: Warden's Office, Employee Breakrooms, offender and employee dining rooms, law library, general library, housing areas, offender work and educational areas, visitation areas, and other areas as determined by the Warden. Postings in English and Spanish were found in each of these areas. The posting in the housing areas was placed high on the bulletin board and was behind security glass to ensure offenders would not remove the posting. Because of the height of the posting placement, it was difficult to read. This was corrected immediately.

Offenders who are blind, deaf, or seriously mentally ill are not housed at this facility. Disabled offenders interviewed reported they are provided staff assistance if needed. PREA information is available to offenders through a video which provides closed captioning and through numerous English and Spanish signs placed throughout the facility. The medical department will contact the Assistive Disability Services department who will provide an Advanced, Master, or equivalent ASL interpreter.

Compliance Determined by:

Administrative Directive 04.25, Language Assistance Services for Offenders Identified as Monolingual Spanish-Speaking

Administrative Directive 06.25, Qualified Interpreter Services- American Sign Language

Correctional Managed Health Care policy G 51.1, Offenders with Special Needs

Safe Prison PREA Plan

Interviews with staff and offenders  
Observations during facility tour

**Standard 115.17 Hiring and promotion decisions**

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

Agency policies do not allow the hiring of an employee or contractor or promotion of an employee who may have contact with offenders who have engaged in sexual abuse in prison, jail, lockup, community confinement, or juvenile facilities or who have been administratively or civilly adjudicated to have engaged in these activities. The agency has a system of collecting criminal information concerning contractors and employees on a daily basis.

The Human Resource department for the agency collects pre-employment information and completes criminal background checks. Because this department is located in Huntsville, Texas, a previous interview with the Human Resource Administrator was provided. The Human Resource department contacts previous institutional employers and asks about misconduct and about resignations in lieu of termination for conduct outlined in this standard. This information is documented. The agency also provides this information to institutional employers upon request. A phone interview was conducted with the Human Resource staff and this auditor was provided documentation confirming the agency contacts previous institutional employers as required by this standard. A random selection of records revealed that criminal background checks are conducted as required in this standard provision.

The agency also considers acts of sexual abuse or harassment when making promotion decisions. Employees have a continuing duty to report such information. During annual in-service training, staff is asked about such misconduct. Failure to disclose such information during employment with the agency is grounds for termination.

Compliance Determined by:

Example of information received from the Criminal Justice Information System  
Review of Human Resource information  
Executive Directive PD-71, Selection System Procedure  
Review of Prior Interview with Human Resource Administrator  
Phone interview with Human Resource staff  
Review of Human Resource Record Information

**Standard 115.18 Upgrades to facilities and technologies**

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

The PAQ states and the Warden confirmed the facility has not made any substantial expansions or

modifications to the facility since August 2012. The Warden explained that the facility was approved for grant funds to install cameras in the housing areas. He expects the camera installation to begin this year.

Compliance Determined by:

Interview with the Warden  
Observations during the facility tour  
Informal discussions with facility staff

### **Standard 115.21 Evidence protocol and forensic medical examinations**

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

The agency is responsible for conducting administrative and criminal investigations of sexual abuse to include offender-on-offender sexual abuse and staff-on-offender sexual abuse, sexual harassment, and sexual misconduct. All allegations of sexual abuse or harassment are referred to the Office of the Inspector General. The Office of the Inspector General conducts all criminal investigations. Facility investigators conduct all administrative investigations.

Agency directives provide excellent procedures for collecting and preserving evidence and securing a crime scene. Sexual assault investigations comply with the Department of Justice Office on Violence against Women publication, A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, second edition. Youthful offenders are not housed at this facility, so this provision of the standard is not applicable.

Investigators were interviewed and were knowledgeable about crime scene preservation, preserving forensic evidence, the dynamics of sexual abuse in a correctional setting and the agency's procedures for conducting these investigations.

State law requires that one or more healthcare facilities will be designated as the primary healthcare facility for the community. This healthcare facility will be required to provide emergency medical services and evidence collection for sexual assault survivors on a community or area wide basis. The bill affords the survivor the right to a forensic medical exam, a private area, if available, to wait or to speak to medical, legal, or sexual assault crisis center staff or volunteer until a physician, nurse or physician assistant is ready to treat the survivor. Those that perform the forensic medical exam are required to have basic forensic evidence collection training that is approved or recognized by the appropriate licensing board. Victims are not charged for medical care or forensic exams related to the sexual assault.

The Huntsville Memorial Hospital in Huntsville, Texas provides forensic exams to sexual assault or abuse victims from the facility. The hospital was contacted during the audit and confirmed that SANE nurses are available to conduct forensic examinations when needed and that offenders are not charged for these services.

The agency has made efforts to access the services of rape crisis centers statewide. William Stephens, Corrections Institutional Division Director and the previous agency PREA Coordinator sent a letter requesting sexual assault victim advocacy services to all rape crisis centers throughout Texas

associated with the Texas Association against Sexual Assault. This letter explained the requirements of the PREA law and requested a partnership to provide services for victims within the agency. Some rape crisis centers responded and entered into a Memorandum of Understanding with the TDCJ to provide services. There was no affirmative response for rape crisis centers in the area of the Eastham facility. More recently the agency Safe Prison PREA Manager and PREA Ombudsman led a workshop at the 2016 annual TAASA (Texas Association Against Sexual Assault) conference. The workshop provided a general overview of the Prison Rape Elimination Act. The national standards were reviewed, with special attention to the standards that required partnering with rape crisis centers and providing victim advocacy services. The workshop included discussions about various partnerships to include MOU's with the TDCJ.

The agency trained employees to provide victim advocacy services. The trained Offender Victim Representatives are available to accompany the offender to the hospital and to provide support services through the investigation process. Interviews were conducted with an Offender Victim Representative and documentation of training was reviewed. Addresses and phone numbers for rape crisis centers are posted in the law library, despite the agency not having an MOU with a rape crisis center.

Compliance Determined by:

Safe Prison PREA Plan  
Administrative Directive 16.03, Evidence Handling  
Safe Prison/PREA Operations Manual  
OIG 04.25, Offender Sexual Assault Investigations  
Phone interview with hospital emergency room staff  
Interview with an Offender Victim Representative  
OVR Training Records

#### **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)

The Office of the Inspector General (OIG) is an independent office, reporting to the Texas Board of Criminal Justice. This office serves as the investigative and law enforcement entity for the agency. Administrative investigations are conducted at the facility level by trained facility investigators. Criminal investigations are conducted by OIG investigators. If the evidence is sufficient for criminal prosecution, the OIG Office refers the case to the county prosecutor. These referrals are documented and the OIG office maintains contact with the prosecutor's office until the case is resolved. Incidents of alleged sexual abuse (offender-on-offender or staff-on-offender) are reported to the OIG through the Emergency Action Center. The OIG decides if a forensic exam is indicated and instructs staff concerning crime scene preservation, evidence collecting, and the like. The agency policy regarding the referral of sexual abuse or sexual harassment for criminal prosecution is published on the agency website.

During the past year there were twenty-five allegations of sexual abuse or sexual harassment. There were ten incidents investigated by the OIG. Facility investigators conducted the administrative investigations. There were four active investigations at the time of the site visit. One case has been referred for criminal prosecution. The case is awaiting trial.

Compliance Determined By:

Interviews with investigators  
Review of investigations  
Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents  
AD 16.20, Reporting Incidents/Crimes to the Office of the Inspector General  
Board Policy 1.07, Inspector General Policy Statement  
OIG Procedure 04.05, Offender Sexual Assault Investigations

### **Standard 115.31 Employee training**

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

The agency requires comprehensive PREA training for all employees. This training is provided in pre-service, annual in-service, and monthly during shift turnout. A script of the video entitled, Safe Prisons PREA in Texas was reviewed. This video thoroughly addresses each required provision in this standard. Following the PREA training, each participant documents that they received and understood the training. Medical staff sign attendance rosters and take post-test to verify their understanding of the training. This required training was completed by 99.4% of employees

Executive Directive 12.10, TDCJ Training Database outlines the requirements for entering and maintaining employee training records in the agency database. Employees who are reassigned from facilities housing the opposite gender offenders are provided additional training. The Gender Specific Training schedule was reviewed.

A random selection of training records were reviewed and confirmed the training is being provided as outlined in this standard provision. Interviews with employees verified the training was provided but some staff interviewed did not seem to have only a very broad understanding of PREA and the Safe Prison PREA Program. . It is recommended that the facility administration consider more frequent training for staff. The facility is in compliance with this standard.

Compliance Determined by:

Gender Specific Training Schedule  
Safe Prisons/PREA in Texas – Video Script  
AD 12.20, Implementation and Operation of the TDCJ In-Service Training Program for Uniformed and Non-Uniformed Employees  
Correctional Training and Staff Development – In-service Training,  
Safe Prisons/PREA Program Lesson Plan  
Executive Directive 12.10, TDCJ Training Database  
Review of Employee Training Records  
Employee interviews

### **Standard 115.32 Volunteer and contractor training**

- Exceeds Standard (substantially exceeds requirement of standard)

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

Administrative Directive 7.35, Administration of Volunteer Services requires an agency-wide plan that includes the training of all agency volunteers. The TDCJ Volunteer Training and Orientation Handbook was reviewed and addresses the agency's zero tolerance policy, provides definitions of and consequences for prohibitive behaviors, and details reporting mechanisms for reporting sexual abuse and sexual harassment.

The agency has provided PREA training for 22,697 volunteers and 16 contractors. The level and type of training provided is based on the services provided. Volunteers sign the Volunteer Training and Orientation form acknowledging receipt of the TDCJ Volunteer Training and Orientation Handbook and acknowledging that they attended and understood the training provided. Interviews with volunteers and contract employees support compliance with this standard.

Compliance Determined by:

Safe Prisons/PREA Plan  
 Volunteer Training Attendance and Acknowledgement forms  
 Administrative Directive 7.35, Administration of Volunteer  
 Interviews with volunteer and contract employees

**Standard 115.33 Offender education**

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

The Eastham Facility is not an intake facility. During intake offenders are provided PREA information through a pamphlet, Offender Handbook and PREA video. Offenders transferred to the Eastham facility also receive written PREA information, view the PREA video, and attend a PREA peer education class. Offender education is documented and is available on the TDCJ data base. This data base maintains records of the offender's participation in training at each facility in which the offender is housed. PREA training for offenders was reviewed during the site visit and confirmed that offenders are receiving PREA education as required by this standard.

Most non-English speaking offenders in the Texas system are Spanish speaking. All PREA education material, posters, signage, videos, and the like are available in Spanish. The agency has a program for certifying bilingual employees as interpreters. There are several Spanish speaking interpreters at the Eastham facility. While interviewing non-English speaking offenders, a facility interpreter assisted the auditor and demonstrated excellent interpretive skills. The facility attempts to provide a trained interpreter for each shift. Interviews with staff and offenders confirmed that staff interpreters are available when needed.

Offenders who are blind, deaf, or seriously mentally or cognitively impaired are not housed at this facility. Offenders with impaired vision are provided information upon transfer through the PREA video. Offenders with hearing loss receive this information through pamphlets, and the PREA video (closed captioning). Interviews with offenders confirmed that information is presented in a manner that they were able to understand.

PREA information is available to offenders through the Offender Handbook, and PREA Pamphlets and brochures. A posting is on each housing area, law library, visitation area and general library.

Although almost all offenders were familiar with PREA, offenders who had been housed at the facility for a longer period were less familiar than those offenders who had entered the facility within the past three years. It is recommended that the facility consider additional options for presenting this information that stresses the agency's commitment to zero tolerance, offender's rights and reporting options. Further the facility should consider periodically replaying the PREA video for the offender population to ensure all offenders are well aware of the agency's zero tolerance policy and their rights in regards to sexual abuse and sexual harassment. The posting in the housing area was posted higher than normal and was difficult to read. This was corrected during the site visit.

Compliance Determined by:

Unit Classification Procedure 5.0, Orientation Procedures  
TAAASA Brochure – Prison Rape (English and Spanish)  
Interviews with staff and offenders  
Offender Handbook  
Observations on the facility tour

#### **Standard 115.34 Specialized training: Investigations**

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

The facility and agency investigators have received the general PREA training provided to all employees and training in conducting administrative and criminal investigations. Facility investigators are responsible for conducting administrative investigations and OIG investigators are responsible for conducting criminal investigations.

Investigators are required to be licensed as peace officers. OIG investigators attend NIC PREA Investigation Training and are tested to ensure the material presented was understood by the investigator. The lesson plan for course 2029, Interview and Interrogation and course 3201 Sexual Assault Investigative Topics were reviewed. Both courses are required for OIG investigators. The specialized training provided to investigators include techniques for interviewing sexual assault victims, proper use of Miranda and Garrity warnings, sexual abuse in confinement settings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. A roster was reviewed for each OIG investigator that included the names, date of training, and test score.

Facility administrators attend a course entitled, Safe Prisons/PREA Investigation Training. Training records for facility investigators were reviewed. The agency has 142 OIG investigators and 52 facility investigators who have completed the required training.

Compliance Determined by:

Interviews with Investigators  
OIG 02.15, Training Procedures  
Lesson Plan 2029 – Interview and Interrogation

**Standard 115.35 Specialized training: Medical and mental health care**

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

The agency has contracted with the University of Texas, Medical Branch to provide medical and mental health care at the Eastham facility. The medical contractor is responsible for providing the specialized training required by the PREA standards, for medical and mental health staff.

There is 23 medical and mental health staff at the facility. All medical and mental health staff has received the training required by agency policies. The orientation of new healthcare employees, both full and part-time, includes training in the detection, assessment, and response to offender-victims of sexual abuse and sexual harassment, the preservation of physical evidence, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Employees must pass a post test at the conclusion of the training to ensure they understand the material. Annual refresher training is also provided to ensure healthcare employees know the current sexual abuse and harassment policy and procedures. Healthcare staff attends the annual PREA refresher training that is provided to all employees. The facility's healthcare providers do not provide forensic exams. These exams are provided by qualified healthcare providers Huntsville Memorial Hospital in Huntsville, Texas. There is no cost to the offender for these exams.

Interviews with employees and a review of training logs confirmed that healthcare staff is provided the training required by this standard.

Compliance Determined by:

CMHC Policy C-25.1, Orientation Training for Health Services Staff  
CMHC Policy C-19.1, Continuing Education/Staff Development  
Training logs  
Interviews with medical and mental health staff

**Standard 115.41 Screening for risk of victimization and abusiveness**

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

All offenders are assessed for risk of sexual victimization or sexual aggression by sociologists at TDCJ intake facilities. Offenders are reassessed upon transfer to another facility. The Unit Safe Prison/PREA staff complete this assessment the day the offender arrives at the facility. The completed risk screening is provided to the Unit Classification Committee.

There were 1,056 offenders received at the Eastham Unit in the past 12 months, whose length of stay was 72 hours or longer. Of these offenders 99.6% were assessed for risk levels within 72

hours. Interviews with staff and offenders confirmed that offenders received this screening on the day of their transfer to the Eastham facility, as required by agency policies.

The agency has developed an excellent screening assessment tool. The Offender Assessment Screening form includes questions regarding an offender's age, mental, physical build, and developmental disabilities, previous incarcerations, a non-violent criminal history, whether the offender has prior convictions of sexual abuse of a child or adult, whether the offender engaged in sexual abuse or violence in an institution, whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; previous sexual victimization and sexual abusiveness. The offender's opinion of their risk of sexual assault or harassment is also considered. A file review is conducted prior to the interview to verify information regarding prior incarcerations, sexual offenses, violent criminal history, prior institutional violence or sexual abuse. The form includes a section of the form includes interviewer follow-up questions, comments, referrals to mental health, and a section for the committee's review and recommendations.

Offenders are not disciplined for refusing to answer or disclose information on the Offender Assessment Screening form. Following the assessment, the Unit Classification Committee meets with the offender; reviews risk assessment information and any additional information received from medical and mental health staff, security, or other sources. Offenders are reassessed if new information is received, upon referral or request, or following an incident of sexual abuse. In the past year, there were 33 offenders (3%) who were reassessed within 30 days due to additional, relevant information received since intake.

The risk assessment is placed in the offender's classification folder in the Records Office. Access to the risk assessment is limited.

Compliance Determined by:

Interviews with offenders and staff  
Safe Prison/PREA Plan  
Safe Prison/PREA Operations 3.01, Offender Assessment Screening  
IPM-CL-69, Psychological Screening Interview Form

**Standard 115.42 Use of screening information**

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

The Unit Classification Committee typically meets with the offender on the day of transfer. The committee uses information from the risk screening to make housing, bed, program, and work assignments. The Safe Prison/PREA Plan requires that these decisions are made on an individual basis. Housing, work, and program placement for transgender and intersex offenders is also done on an individual basis, with consideration given to the offender's view of their safety. The Unit Classification Committee meets with these offenders at least every six (6) months to review any threats to safety experienced by the offender. The offender's opinion concerning their safety is given consideration. There are no transgender or intersex offenders housed at the Eastham Unit at this time. The TDCJ does not have dedicated housing for transgender or intersex offenders.

Compliance Determined by:

Safe Prison PREA Operations Manual 3.02, Special Population Review  
Administrative Directive 04.17, Offender Housing Assignment Criteria and Procedures  
Administrative Directive 04.18, Offender Jobs: Assignments, Job Descriptions, Selection Criteria, Work Programs And Supervision;  
Safe Prison PREA Plan;  
CMHC Policy E-35.1, Mental Health Appraisal for Incoming Offenders  
SPPOM-03.01 Assessment Screening  
CID Policy 04.01, Intake Procedures  
CMHC G-51.11, Treatment of Offenders with Intersex Conditions, or Gender Dysphoria, Formerly Known as Gender Identity Disorder  
Interviews with staff and offenders

**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)

The Safe Prison PREA Plan restricts facilities from placing offenders at high risk for sexual victimization in protective housing unless no other housing options are available to separate the offender from likely abusers. If the assessment of alternative housing options cannot be performed immediately, it must be completed within 24 hours. The offender is placed on transient status where the offender is separated from the general population until alternative housing can be arranged, not to exceed 24 hours. Offenders at high risk of victimization will only be assigned to protective custody while an alternative means of separation is arranged, not to exceed 30 days.

The Administrative Segregation Plan outlines the privileges afforded to those offenders placed in protective custody to ensure sexual safety. The plan directs the units to provide out of cell recreation seven days per week for one hour or five days per week for two hours per day. Outside recreation is available weekly. Recreations and exercise equipment is provided. Offenders are afforded library, visitation, and commissary privileges. If privileges are restricted, the facility must document the specific opportunities that have been restricted, and the reason(s) and duration of the restrictions. The Administrative Segregation Plan requires that the Unit Classification Committee will conduct an initial review of the protective custody placement within seven days. A document review is conducted every seven days, thereafter for 60 days. After the initial 60 days, the offender is reviewed every 30 days to determine if there is a continuing need for separation of the offender from general population.

There have been no offenders at high risk of sexual victimization placed in protective custody during this audit period.

Compliance Determined by:

Safe Prison/PREA Plan  
Administrative Segregation Plan  
Interview with the Warden

**Standard 115.51 Offender reporting**

- Exceeds Standard (substantially exceeds requirement of standard)

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

Offenders may report sexual abuse, sexual harassment, extortion, violence, or retaliation to any correctional staff, facility administrators, Safe Prison/PREA Management Office, or through a third party, the grievance procedure, or anonymously. Reporting information is available to the offender in the Offender Handbook, PREA pamphlets, and postings in the facility. In addition, this information is provided through the PREA video which is shown at intake and upon transfer to the facility.

Board policy requires that correspondence sent to the Office of the Inspector General or the PREA Ombudsman is considered special correspondence and may be sealed by the offender. This is the practice at the facility and was verified through an interview with mailroom staff. The office of the Inspector General and the PREA Ombudsman report to the Board of Criminal Justice and are considered an independent entity. Writing supplies and postage is provided for indigent offenders.

Staff accepts reports from offenders verbally, in writing, anonymously, and through a third party. Staff interviews indicated that verbal reports are documented immediately. Staff is able to privately report to the Office of the Inspector General and the PREA Ombudsman. Most staff felt they could make private reports to the facility administration as well.

Compliance Determined by:

Interviews with random staff mailroom staff, and offenders  
 Interview with the Warden  
 Board policy, 3.91, Uniform Correspondence Rules  
 TBCJ PREA brochure  
 Administrative Directive 14.09, Postage and Correspondence Supplies  
 Executive Directive 2.10 Prison Rape Elimination Act Complaints and Inquiries  
 Safe Prison PREA Plan

**Standard 115.52 Exhaustion of administrative remedies**

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

Board Policy establishes procedures for the handling of grievances filed by offenders. The Safe Prison/PREA Plan requires that a time limit will not be imposed for filing grievances that allege sexual abuse. Offenders are not required to utilize the informal grievance process prior to filing a formal grievance. All grievances will be completed within 40 days. Grievances related to sexual abuse are considered emergency grievances and must be completed within 40 days. Extensions for these grievances are not allowed. The time limit does not include the time period in which the offender is preparing an appeal. If the offender does not receive a response to a grievance within the allotted time period, the offender may consider the absence of a response to be a denial at that level. The plan states that offenders who allege sexual abuse may submit a grievance to someone other than the staff member who is the subject of the grievance. The plan also prohibits the referral of the grievance to a staff member who is the subject of the sexual abuse grievance.

If the grievance alleges imminent sexual abuse, the grievance is forwarded to a level of review for immediate corrective action. An initial response will be rendered within 48 hours of receipt and a filing decision within five working days. The initial response and the final response will document whether the offender is in substantial risk of imminent harm and the action taken. There were 19 grievances that alleged imminent sexual abuse during this audit period.

Third parties can assist an offender in filing a grievance related to sexual abuse or may file a grievance on behalf of an offender for allegations of sexual abuse, sexual contact, or sexual assault. Third parties include fellow offenders, staff members, family members, attorneys, or advocates. The named offender will be informed of the grievance and given the opportunity to accept or decline an investigation of the grievance. If the offender chooses to have the matter investigated, the offender is required to complete a grievance form. The offender's decision is documented on the Third Party Preliminary Investigation form.

The grieving offender will not be disciplined for filing a grievance related to sexual abuse unless the grievance was filed in bad faith. The grievance officer was interviewed and PREA related grievances were reviewed. The interview and document review support compliance with this standard.

Compliance Determined by:

Board Policy 3.77, Offender Grievances  
Administrative Directive-03.77, Offender Grievances,  
Review of offender grievances  
OGOM 1.04, PREA Allegations  
OGOM 4.00, Grievance Timelines  
OGOM 9.0, Third Party Grievances  
Offender grievance logs  
Safe Prisons PREA Plan  
Interview with grievance officer

**Standard 115.53 Offender access to outside confidential support services**

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

The agency has not been able to obtain an MOU with a rape crisis center for the Eastham Unit. The names, addresses, and phone numbers of rape crisis centers in Texas are posted in the law library for access by offenders. Offenders can correspond with these crisis centers by having a third party call or write the crisis center or the offender can correspond with the rape crisis center through the PREA Ombudsman. Correspondence with the PREA Ombudsman is considered special correspondence. Special correspondence is sealed by the offender and not inspected. The PREA Ombudsman will forward correspondence between the offender and the rape crisis center. The rape crisis center is not obligated to report the abuse.

The agency has made considerable efforts to obtain a Memorandums of Understanding with rape crisis centers across the state. William Stephens, Correctional Institutions Division Director and agency PREA Coordinator sent solicitation letters to all rape crisis centers throughout Texas that are affiliated with the Texas Association against Sexual Assault. The agency PREA Manager recently

attended the March 2016 Texas Association of Sexual Assault conference. The Agency PREA Manager provided an informational seminar regarding the scope of MOU's with the TDCJ, handling of offender reports and the like, in an effort to encourage rape crisis centers to consider entering into an MOU with the TDCJ.

Due to the limited response from the rape crisis centers, the TDCJ developed a training program to train selected employees as Offender Victim Representatives. Staff is trained to provide victim support for offenders who have been victims of sexual assault. The OVR provides support through the forensic exam and investigatory interviews. The Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative, outlines the selection, training and duties of the Offender Victim Representative.

During the audit, an Offender Victim Representative was interviewed and training reviewed. The OVR was knowledgeable about his role and responsibilities.

Compliance Determined by:

Safe Prisons PREA Plan  
Board Policy 03.91, Uniform Offender Correspondence Rules  
Offender Orientation Handbook  
Observations during the facility tour  
Interviews with offenders, staff, and Offender Victim Representative  
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries  
Listing of Rape Crisis Centers within the state  
Solicitation Letter  
MOU Example from another unit  
Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative

#### **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)

Third parties can contact the PREA Ombudsman or the Office of the Inspector General to report sexual abuse or harassment. The agency website provides an on-line brochure entitled, General Information Guide for Families of Offenders. The address, phone number and email address for the PREA Ombudsman is available in this on-line brochure. Information regarding the Office of the Inspector General is also available on the agency website and includes contact information. PREA informational postings which include reporting options are posted in the visitation area as well.

Compliance Determined by:

SPPOM-04.02, Receiving Allegations of Sexual Abuse from an Outside Agency  
On-line Brochure entitled, General Information for Families of Offenders  
Executive Directive 02.03, Ombudsman Program  
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries  
Postings throughout the facility  
Safe Prison/PREA Plan

### **Standard 115.61 Staff and agency reporting duties**

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

Agency directives require all staff to immediately report any knowledge, suspicions, or information regarding sexual assault, sexual harassment, retaliation against staff or offenders for reporting, and any neglect on the part of staff that may have contributed to an incident or sexual abuse or harassment or retaliation on any unit whether or not it is a TDCJ facility. All such reports are forwarded to facility investigators and/or OIG investigators.

The Safe Prison/PREA Plan also prohibits staff from revealing any information regarding a sexual abuse report to anyone other than a supervisor or officials and only to the extent necessary to make informed treatment, investigative, security, or management decisions. Random interviews with staff support compliance with this standard.

Healthcare policies require health care staff to notify the Security Supervisor and physician/mid-level practitioner of any offender complaints of sexual abuse/assault. Interviews with staff and a review of pertinent policies confirm compliance with this standard.

Compliance Determined by:

Safe Prison/PREA Plan

Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General  
Correctional Managed Health Care Policy G-57.1, Sexual Assault/Sexual Abuse  
Interviews with random staff, medical and mental health providers

### **Standard 115.62 Agency protection duties**

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

The Safe Prison PREA Operations Manual requires the first Security Officer to learn of an alleged sexual abuse to immediately separate the victim from the alleged abuser. Staff interviewed understood their responsibility to protect victims by separating the victim from the alleged abuser. Security staff is provided a pocket guide that outlines the appropriate steps to take if they receive a report of sexual abuse. There were no incidents in which it was determined that the offender was at substantial risk of imminent sexual abuse. The interview with the Warden and staff and a review of agency policies supported compliance with this standard.

Compliance Determined by:

Safe Prison PREA Operations Manual - 05.01, Sexual Abuse Response and Investigation

Safe Prison PREA Operations Manual - 05.03, Time Frames Associated with Offender Protection Investigations  
Interviews with the Warden and random staff

**Standard 115.63 Reporting to other confinement facilities**

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

The Safe Prison PREA Management Office coordinates the reporting of allegations of sexual abuse occurring at another facility outside of TDCJ. Notification is made within 72 hours, to the facility or designated department within the agency in which the alleged abused occurred. Notification is documented and maintained in the Safe Prison PREA Management Office. An example of the notification letter was reviewed. There were no allegations received by the facility that an offender was abused while confined at another facility.

If the Warden or department head receives notification from an outside agency that an offender in the outside agency's custody alleged sexual abuse while assigned to TDCJ custody, shall ensure the allegation is forwarded to the PREA Ombudsman Office for possible investigation. There were no reports from outside agencies during this reporting period. The facility reported that there were four such reports received from facilities within the TDCJ during the past 12 months. These reports were reviewed and support compliance with the standard.

Compliance Determined by:

Safe Prison/PREA Operations Manual 4.01, Reporting Incidents of Sexual Abuse to Other Confinement Agencies  
Safe Prison/PREA Operations Manual 4.02, Receiving Allegations of Sexual Abuse from an Outside Agency  
Review of investigations  
Interview with Unit Warden

**Standard 115.64 Staff first responder duties**

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

Agency policies require the first Security Officer to receive notification of an alleged sexual abuse to immediately separate the victim from the alleged abuser. The Security Supervisor will conduct an initial interview to determine the nature of the abuse, the date, time, location of the incident and the identity of the assailant. If the abuse occurred within 96 hours of the allegation, the victim and alleged abuser is advised not to brush teeth, change clothing, wash, urinate or defecate, smoke, drink or eat. The Security Supervisor will contact OIG, the duty Warden, highest ranking Security Supervisor, medical and mental health staff, the Offender Victim Representative, the Emergency Action Center and the Unit Safe Prison/PREA Manager. OIG determines if the victim needs a

forensic exam, provides instruction for crime scene preservation and whether the alleged abuser should be placed in a dry cell to preserve evidence.

Agency policies also provide comprehensive instructions for evidence handling and crime scene preservation in the event a criminal act is committed on TDCJ property. First responder duties are also summarized on a pocket size card provided to security staff. First responders, investigative staff, and random staff were interviewed and were aware of their responsibilities.

There were twenty-five incidents in which an allegation of sexual abuse was received. Of these allegations, there were no incidents in which the first responding Security Officer separated the victim from the alleged abuser. There was no occasion the alleged incident occurred within a time period that allowed for the collection of evidence but the victim refused a forensic exam. The investigations were reviewed and found to be in compliance with this standard.

The Safe Prison/PREA Plan requires that, if the first staff responder is not a correctional officer, the responder shall monitor the victim to ensure physical evidence is not destroyed and shall immediately notify a correctional officer. There were three incidents during this audit period in which the first person to receive a report of sexual abuse, was not a correctional officer. In each incident the staff member instructed the victim not to take steps and notified security staff.

There were 25 allegations of sexual abuse during this audit period. In all cases, the first responder was a security officer. When applicable, the security officer preserved the crime scene, requested the victim not to take measures that could destroy physical evidence. The security officer also ensured the abuser did not take any actions that could destroy physical evidence.

The review of agency policies, interviews with staff and offenders supported compliance with this standard.

Compliance Determined by:

Administrative Directive 16.03, Evidence Handling  
Safe Prison/PREA Operational Manual 05.01, Sexual Abuse Response and Investigation  
Safe Prison/PREA Plan  
Review of investigations  
Interviews with random staff, first responders, and investigators

### **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)

The Safe Prison/PREA Operational Manual outlines the agency plan for a coordinated response to allegations of sexual abuse. The plan addresses the roles and duties of first responders, medical and mental health practitioners, Security Supervisors, investigators and leadership. The specific responsibilities for each department are outlined in separated policies i.e. medical and mental health response is outlined in the healthcare policy, investigators duties in OIG policies.

A review of agency policies and interviews with staff supported compliance with this standard.

Compliance Determined by:

Safe Prison/PREA Operational Manual

Safe Prison/PREA Plan

Interviews with security, mental health, medical staff, investigators, and persons in leadership roles

**Standard 115.66 Preservation of ability to protect offenders from contact with abusers**

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

This standard does not apply because the Texas Department of Criminal Justice does not have collective bargaining agreements. The agency has the authority to remove any employee alleged to have committed an act of sexual abuse from contact with offenders during the investigation process.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees

Texas Attorney General Webpage

**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)

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees mandates that retaliation will not be tolerated. Rule 20 addresses violations of statutory authority, court order, rules, regulations and policies. Rule 22a addresses harassing or retaliation against another individual. Both rules are level 2 offenses. Disciplinary action for these offenses include probation up to nine (9) months, withdrawal of pay increases, suspension without pay up to twenty work days, reduction in pay, involuntary demotion, and/or dismissal.

The Unit Safe Prison PREA Manager, Susan Steel, is responsible for monitoring retaliation at the Eastham Unit. She monitors retaliation against both offenders and staff. She understands her responsibilities. Documentation of her monitoring activities was reviewed.

The Safe Prison/PREA Plan allows for housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Agency policies require the facility Warden and the Unit Safe Prison PREA Unit Manager to monitor offenders or staff who have reported a sexual abuse or sexual harassment, or witnesses for a minimum of 90 days. Monitoring shall be continued beyond the initial 90 days on a case-by-case

basis. Monitoring includes a review of disciplinary reports, housing or program changes, and negative performance evaluations, reassignment of staff. Monitoring is terminated if the agency determines the allegation is unfounded.

Interviews with the Unit Safe Prison PREA Manager, and offender who reported a sexual abuse confirmed compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan

Executive Directive PD-31, Discrimination in the Workplace

Executive Directive PD-22, General Rules of Conduct and Disciplinary Actions for Employees

Safe Prison PREA Operations Manual 05.08, 90 Day Monitoring for Retaliation

Interview with William Stephens, Director of Correctional Institution Division and agency PREA Coordinator

Interviews with staff charged with monitoring retaliation

Interview with an offender who reported a sexual abuse

### **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)

The Safe Prison PREA Plan mandates that offenders who are at risk of sexual victimization will not be placed in protective custody unless an assessment of all available alternatives have been made and it is determined there is no alternative means of separation available to protect the offender from likely abusers. If an offender is placed in involuntary housing, the offender is reviewed every seven days for the first 60 days and every 30 days thereafter. The PAQ stated there were no offenders held in involuntary segregated housing during this audit period. While interviewing offenders, there were conflicting reports in this regard. After further review it was determined that there were no offenders placed in protective custody because they were at risk for sexual victimization. Interviews with staff assigned to supervise segregation and Administrative Segregation Review Committee members confirmed compliance with this standard.

Compliance Determined by:

Administrative Segregation Plan

Administrative Directive 04.63, Transient Status Offenders

Administrative Directive 03.50, Administrative Segregation

Safe Prison PREA Plan

Guidelines for Administrative Segregation Committee Members

Interviews with offenders and staff assigned to supervise segregation

### **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)

Board policy authorizes the Office of the Attorney General to conduct independent investigations within the TDCJ. The Inspector General reports to the Board of Criminal Justice through the Board Chair. The Office of the Inspector General conducts all investigations in which a crime may have been committed. The facility investigators conduct administrative investigations.

The Safe Prison PREA Plan states investigations of sexual abuse and sexual harassment will be conducted promptly, thoroughly and objectively for all allegations to include third-party and anonymous reports. Investigators are required to complete specialized training in conducting sexual abuse investigations in a correctional setting. The training curriculum for course 3201, Sexual Abuse Investigations, was reviewed. This class is required for OIG investigators. In addition, the training curriculum, Safe Prisons PREA Investigation Training – Conducting a Thorough Investigation was also reviewed. This training course is required for administrative investigators at the facility level.

The Office of Inspector General policies outline the procedures for conducting sexual assault investigations and documenting the investigation. The policy provides specific instructions for gathering DNA evidence and determining if a forensic exam is indicated.

The credibility of a witness is determined on an individual basis and is not determined by the person's status as offender or staff. Offenders reporting sexual abuse are not required to submit to a polygraph or other truth telling device as a condition to proceed with the investigation. Criminal investigations are documented and include a thorough description of physical, testimonial, and documentary evidence and copies of all documentary evidence when feasible. A review of investigation reports support compliance with this standard.

OIG 3.72, Records Retention – PREA states that all criminal and administrative investigations of sexual assault related offenses will be retained for as long as the alleged abuser(s) is incarcerated plus five years and as long as the staff is employed plus five years. Prior to destruction of the records, the Records Supervisor must confirm that the offender is no longer incarcerated or staff member is no longer employed and that five years has passed since the release or termination.

The Safe Prison PREA Plan requires that the departure of the alleged assailant or victim from employment or custody of the TDCJ shall not be the basis for terminating an investigation.

Interviews with investigators and review of training records and investigation reports confirm compliance with this standard

Compliance Determined by:

Board policy 01.07, Inspector General Policy Statement  
Administrative Directive 2.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents  
Administrative Directive 16.03, Evidence Handling  
Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General  
Safe Prison PREA Plan  
Safe Prison Operations Manual  
OIG 3.72, Records Retention – PREA  
OIG 04.05, Offender Sexual Assault Investigations  
Interviews with investigators  
Review of training records

### **Standard 115.72 Evidentiary standard for administrative investigations**

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

The Safe Prison PREA Plan requires that no standard higher than the preponderance of the evidence will be imposed when determining if sexual abuse or sexual harassment occurred. The curriculum for Conducting a Thorough Investigation was reviewed and addresses this provision. Training records and interviews with investigators supported compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan  
Curriculum – Conducting a Thorough Investigation  
Training Records – Investigators  
Interviews with Investigators

### **Standard 115.73 Reporting to offenders**

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

The Safe Prison PREA Plan requires that offenders who have made sexual abuse allegations will be informed by the Unit Classification Committee if the allegations were found to be substantiated, unsubstantiated, or unfounded. The facility provided an example of this notification form, which is in English and Spanish.

If the alleged abuser was staff, the Warden is charged with informing the offender if the staff is no longer assigned to the facility or if the staff is no longer working for TDCJ. If the abuse was determined to be criminal, the Safe Prison PREA Management Office informs the offender if the staff is indicted and if the staff is convicted of the sexual abuse at the facility.

If the alleged abuser is an offender, the Safe Prison PREA Management Office will inform the victim if the abuser is indicted and if the abuser is convicted of the sexual abuse at the facility.

All required notifications are documented. Investigation files were reviewed and contained copies of notifications. The duty to provide notifications terminates if the offender is no longer in TDCJ custody.

Compliance Determined by:

Offender Notification Brochure  
Safe Prison PREA Plan  
Investigation files  
Interviews with Unit Safe Prison Manager, Warden, investigators

**Standard 115.76 Disciplinary sanctions for staff**

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

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees states the sexual misconduct with an offender is considered a level one offense and dismissal is the only disciplinary measure allowed. Only the Executive Director, Deputy Executive Director, or appropriate Division Director is allowed to impose a less severe disciplinary action. This directive also addresses harassment and retaliation. These violations may be considered level one or level two offenses. When imposing sanctions, consideration is given to the circumstance and nature of the offense, past history, and sanctions for comparable offenses. There was one incident of staff violating sexual abuse or sexual harassment rules during this audit period. The ex-employee has been charged and is awaiting trial.

The contractor is responsible for notifying licensing bodies of any terminations for violations of sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees  
Discussions with Unit Safe Prison PREA Manager and Warden

**Standard 115.77 Corrective action for contractors and volunteers**

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

The Volunteer Services Plan clearly states that agency’s policy of zero tolerance, explanation of prohibited behaviors, and the consequences for engaging in these behaviors. The plan clearly states that violators will not be allowed to continue to volunteer with the TDCJ and may face criminal prosecution. The Safe Prison PREA Plan states that volunteers or contractors who engage in sexual abuse will be reported to relevant licensing bodies. This plan mandates that the units are to take appropriate remedial measures and shall consider whether to prohibit further contact with offenders, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by a contractor or volunteer. A review of the training and orientation provided for contractors and volunteers and interviews with volunteers and contractors confirm compliance with this standard.

During this audit period, there were no incidents of volunteers or contractors reported to law enforcement agencies for engaging in sexual abuse of an offender.

Compliance Determined by:

Volunteer Services Plan  
Safe Prison PREA Plan  
Acknowledgment of Volunteer Training/Orientation form  
Volunteer Training Facilitators Guide  
Warden, Volunteer and contractor interviews

**Standard 115.78 Disciplinary sanctions for offenders**

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

The Safe Prison PREA Plan requires that offenders should face disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse, sexual harassment, extortion, substantiated acts of violence or following a criminal finding of offender-on-offender sexual abuse. Sanctions should be appropriate to the nature of the abuse committed, the offender’s disciplinary history, and sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process considers whether an offender’s mental disabilities or mental illness contributed to his behavior when considering what sanction, if any, should be imposed. Consensual sex between offenders is a violation of agency rules and may result in disciplinary sanctions. Offenders may be disciplined for sexual contact with staff if there is a finding that the staff did not consent. If the offender makes a report of sexual abuse in good faith, upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying even if the investigation finds the allegations could not be substantiated for the purpose of disciplinary action. During this audit period there have been no administrative or criminal findings of offender-on-offender sexual abuse at the Eastham Unit.

The facility provides therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, if the offender is willing to participate in the treatment but the offender is not denied access to programs or other benefits for refusing to participate in the treatment offered.

Compliance Determined by:

Safe Prison PREA Plan  
Interviews with the Warden and Mental Health staff

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

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

The Safe Prison PREA Plan requires that offenders are offered a referral to a medical or mental health practitioner if the screening tool indicates the offender has experienced prior victimization in an institutional setting or in the community. The offender must be seen within 14 days of the intake screening. All offenders who disclosed prior victimization during the risk screening were offered a follow-up meeting with a medical or mental health practitioner. The risk screening tool complies with

this policy, notes the date of the referral, and requires the interviewer to attach the completed mental health referral form.

The plan also states that if the screening indicates the offender has previously perpetrated sexual abuse, in an institutional setting or the community, the offender is offered a referral to a medical or mental health practitioner. A review of the screening tool indicates that offenders who have previously perpetrated sexual abuse are referred to the mental health department. As noted above, the risk screening requires the date of the referral and a copy of the referral to be attached to the screening form. The PAQ stated that all offenders who previous perpetrated a sexual abuse were offered a follow-up meeting with medical or mental health staff.

The mental health department provided services to the referred offender within the 14 day time period. Interviews with staff who conduct the risk screening and mental health staff supports compliance with this standard.

Information concerning sexual victimization or abusiveness is limited to medical and mental health staff except as needed for housing, work, education, and program assignments. If the offender reports a prior sexual victimization that did not occur in an institutional setting, the mental health staff obtains informed consent before reporting this information.

Compliance Determined by:

Safe Prison PREA Plan  
Offender Assessment Screening form  
Mental Health Outpatient Clinic Notes  
CMHC I-70.1, Informed Consent  
Interview with Healthcare staff  
Interview with staff completing risk screening

**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)

The Safe Prison Operations Manual and CMHC G-57.1, Sexual Assault-Sexual Abuse, require that an offender, who reports sexual abuse or assault will immediately be evaluated, examined, and referred for required services. The nature and scope of services are provided according the professional judgement of the medical and mental health practitioners. After hours, a tele-med system is utilized for accessing health care professionals. Forensic examinations, if indicated, are provided at a local hospital. Sexual assault victims are provided venereal disease testing and treatment, to include prophylactic treatment.

First responders interviewed were aware of their responsibility to protect the offender and to seek medical care. Staff was aware of how to use the tele-med equipment. Offenders are not charged for these services or denied services if they refuse to name the abuser or cooperate with the investigation.

Compliance Determined by:

Safe Prison Operations Manual  
CMHC G-57.1, Sexual Assault-Sexual Abuse  
Interviews with medical, mental health staff and first responders

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

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

The Safe Prison PREA Plan requires that offenders who have been victimized by sexual abuse in any prison, jail, lock-up, or juvenile facility will be offered medical and mental health evaluation and treatment, as appropriate. These services include treatment plans, follow-up services and referrals for continued care upon transfer to other units or release from custody. Victims of sexual abuse during incarceration are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided without cost to the offender, regardless of whether the victim names the abuser or cooperates with the investigation. A mental health evaluation of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse. Treatment is offered when appropriate in accordance with CMHC policies.

Review of policies and interviews with medical and mental health staff indicates that care is consistent with or exceeds the community level of care.

Compliance Determined by:

Safe Prison PREA Plan  
CMHC E-32.1, Receiving, Transfer and Continuity of Care Screening  
CMHC E 44.1, Continuity of Care  
Interviews with medical and mental health staff

**Standard 115.86 Sexual abuse incident reviews**

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

The Safe Prison PREA Plan requires units to conduct incident reviews for all allegations of sexual abuse and staff sexual harassment, unless the allegation was determined to be unfounded. All incidents are report to the Emergency Action Center. The Warden is required to conduct the incident review and forward the completed report to the Regional Director, PFCMOD Deputy Director, or department head within 10 working days of the notification to the Emergency Action Center, for additional comments. If there are no recommendations or corrective action, the report and all attachments are sent to the EOC within 20 days of the notification to the EOC. The EOC maintains all agency incident reviews in accordance with the records retention policy.

If the report contains recommendations or corrective actions a written 90-day follow-up report is prepared by the Regional Director, PFCMOD Deputy Director, or department head. The completed report must be submitted to the Deputy Director of prison and jail operations, or the PFCMOD

Division Director and the appropriate Division Director or designee within 90-days of the notification to the Emergency Action Center.

There were 16 incident reviews completed during this audit period. Each review was completed within the required 30-day period. A review of incident review reports during this audit period included: consideration as to whether the allegation or investigation indicated a need to change policy; whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status, gang affiliation, or otherwise caused by other group dynamics at the facility; an inspection of the area was completed and addressed whether there were physical barriers in the area abled abuse; staffing levels were assessed; the adequacy of monitoring technology in the area.

Compliance Determined by:

Safe Prison PREA Plan

Interviews with Incident Review Team members

Administrative Directive 02.15, Operations of the EAC and Reporting Procedures for Serious or Unusual Incidents

Review of Incident Review Reports

#### **Standard 115.87 Data collection**

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

The Emergency Action Center is responsible for receiving reports of all serious or unusual incidents, reporting this information to designated administrators, providing a monthly report and providing Executive services with the information necessary to prepare statistical reports. This information is also provided to the Safe Prison PREA Operations Office. The Safe Prison/PREA Operations office enters the information into the Safe Prisons Sexual Assault database. This office receives a monthly report from each unit (private facilities are included) and compiles this information as well as the EOC data, and information received from OIG. This data is analyzed and evaluated for trends in sexual abuse, sexual harassment, and extortion. This office identifies trends in time of day, locations, and demographics, related to sexual abuse victims and assailants, and custody class. A monthly report is sent to the Correctional Institutions Division directors. The agency provided the 2014 Survey of Sexual Violence for review.

Compliance Determined by:

Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents

Safe Prison/PREA Operations Manual 01.01, Safe Prisons/PREA Management Office

Survey of Sexual Violence, 2014

Safe Prison/PREA Plan

#### **Standard 115.88 Data review for corrective action**

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

- Does Not Meet Standard (requires corrective action)

The agency provided the Safe Prisons Program report for the 2013 fiscal year. The reports include data collected and aggregated in order to assess and improve the effectiveness of its Safe Prisons/PREA Plan. The report is comprehensive to include the identification of problem areas, on-going corrective action, and includes information by facility as well as the agency as a whole. The report includes comparison of the current data and corrective actions with prior years and provides an overall assessment of the agency's progress in addressing sexual abuse. The report is available on the agency website.

Compliance Determined by:

Safe Prisons/PREA Annual Report  
Agency website

**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)

The Safe Prison PREA Plan requires that all data collected shall be maintained for at least ten years after the date of the initial collection, unless federal, state, or local law requires otherwise. The Records Retention Schedule was reviewed and is consistent with this policy.

Compliance Determined by:

Safe Prison/PREA Plan  
Records Retention Schedule

**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.

Maggie Capel  
Auditor Signature

8/1/16  
Date