PREA AUDIT REPORT □ Interim  X Final
ADULT PRISONS & JAILS

Date of report: 17 March 2016

Auditor Information

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Date of facility visit:  15 - 17 March 2017

Facility Information

Facility name:  Estelle Unit
Facility physical address:  264 FM 3478, Huntsville, TX 77320-3320
Facility telephone number:  936-291-4200

The facility is:  ☒ State
☐ Federal  ☐ County
☐ Military  ☐ Municipal
☐ Private not for profit

Facility type:  ☒ Prison
☐ Jail

Name of facility’s Chief Executive Officer:  Senior Warden Christopher Carter
Number of staff assigned to the facility in the last 12 months:  868
Designed facility capacity:  3148 / 212 SAFP
Current population of facility:  2991
Age range of the population:  19 - 89

Name of PREA Compliance Manager:  Raquel Elias
Title:  Unit SAFE Prisons/PREA Manager
Email address:  raquel.elias@tdcj.texas.gov
Telephone number:  936-291-4200 Ext. 2132

Agency Information

Name of agency:  Texas Department of Criminal Justice
Governing authority or parent agency:  (if applicable)
Physical address:  861-B-I-45 North, Huntsville, Texas 77320
Mailing address:  (if different from above) P.O. Box 99, Huntsville, Texas 77342
Telephone number:  936-295-6371

Agency Chief Executive Officer

Name:  Brian Collier
Email address:  brian.collier@tdcj.texas.gov
Telephone number:  936-437-2101
Title:  Executive Director

Agency-Wide PREA Coordinator

Name:  Lori Davis
Email address:  lori.davis@tdcj.texas.gov
Telephone number:  936-437-2170
Title:  Director, Correctional Institutions Divisions
AUDIT FINDINGS

NARRATIVE

The PREA Audit of the Estelle Unit, Texas Department of Criminal Justice (TDCJ), was conducted on March 15-17, 2017, by United States Department of Justice Certified PREA Auditors Marc L. Coudriet, Lead Auditor and Debra Dawson, Certified Auditor. Prior to the audit, the Estelle Unit provided the lead auditor with appropriate policies, procedures and facility documentation related to the standards for review. No youthful offenders or female inmates are housed at the Estelle Unit. The audit was coordinated through the American Correctional Association, Alexandria, Virginia. The audit began at 11:30 AM, following their ACA Audit closeout brief. The following facility personnel were assigned to assist the audit team during the audit and tour process: Senior Warden Christopher Carter; Raquel Elias, Unit Safe Prisons/PREA Manager; Assistant Warden Cliff Prestwood; Assistant Warden Christopher Lacox; Major Bobby Rigsby and Major Shane Lemler. Ms. Lorena Steinbecker, Agency Safe Prisons/ PREA Manager was present during this audit as the Agency liaison and to provide insight and guidance on Agency-wide policies as it pertaining to the PREA Program. The following staff accompanied the auditors as we toured the facility multiple times throughout this audit, Senior Warden Christopher Carter; Raquel Elias, Unit Safe Prisons/PREA Manager; Assistant Warden Cliff Prestwood; Assistant Warden Christopher Lacox; Major Bobby Rigsby; Major Shane Lemler; Ms. Lorena Steinbecker, Agency Safe Prisons/PREA Manager and Officer Keith Tucker. All areas of the Estelle Unit were toured including, intake, all inmate housing units, restrictive housing, the medical area, food service, education, law library, work areas and the recreation areas. The auditors informally interviewed (1) volunteer; (15) staff and (11) inmates.

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

Following the protocols of making contacts, and checking on the posting of notices (posting was initiated through the American Correctional Association (ACA) and the facility, Estelle Unit) this auditor reviewed each item on the Pre-Audit Questionnaire and additional material sent prior to discussion and the audit visit.
Ms. Brenda German, Administrative Assistance IV provided the PREA standards files for preliminary review, these files were used to complete most of the information on the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other documents in advance to identify additional information that might be required during the site visit. Additional information of the Estelle Unit was provided in a binder upon arrive to Huntsville, Texas.

The Texas Department of Criminal Justice contracted with ACA to conduct a PREA Audit of the Estelle Unit, March 15-17, 2017.

This auditor stayed in Huntsville, Texas and was transported to the Estelle Unit daily by Officer McFarland. On Wednesday the tour was completed and the auditors conducted formal interviews with thirty-one staff (31), two (2) contract support personnel and forty-nine (49) inmates. On Thursday the auditor conducted formal interviews with seven (7) staff and eighty-five (85) inmates. Formal interviews were conducted with staff from all shifts, during the audit a total of fifty-six (56) staff and one hundred forty-five inmates (145) were formally or informally interviewed. Formal interviews were conducted utilizing the PREA questionnaires with the following facility staff: Senior Warden, PREA Compliance Manager, Human Resource Managers, one high level staff, Chaplain, Investigator, medical staff, staff who perform screening for risk of victimization and abusiveness, staff on the incident review team, the designated staff member charged with monitoring retaliation, intake staff, volunteers, contractors, and random staff. Formal interviews were conducted utilizing the PREA questionnaires with the following inmate groups: inmates who filed a PREA grievance; inmates who identify in a LGBTI group, inmates who are disabled, inmate who have limited English speaking skills, inmates who have reported victimization and a random inmates from the high security and general housing population.

The mission of the Texas Department of Criminal Justice is to provide public safety, promote positive change in offender behavior, reintegrate offenders into society and assist victims of crime.

The W. J. Estelle Unit Mission is to maintain a safe, clean and professional environment for employees, guest, and offenders; promote offender rehabilitation by utilizing programs and services available through Windham Schools, Substance Abuse Felony Punishment Facility (SAFPF), Serious and Violent Offender Re-Entry Initiative (SVORI), Corrective Intervention Pre-Release Program (CIPP) and Regional Medical Center; and to assure the management of the W.J. Estelle Unit meets or exceeds all constitutional and statutory standards.

**SUMMARY OF AUDIT FINDINGS**

Number of standards exceeded: 2  
Number of standards met: 39  
Number of standards not met: 0  
Number of standards not applicable: 2
The W. J. "Jim" Estelle Unit (E2, originally the Ellis II Unit) is a prison located on Farm to Market Road 3478 in unincorporated Walker County, Texas, United States, 10 miles (16 km) north of central Huntsville. The prison, with approximately 5,459 square feet of space, is operated by the Texas Department of Criminal Justice. The unit, which opened in June 1984, was named after Ward James "Jim" Estelle, a former prison director of Texas. The Estelle Unit has a geriatric facility, a program for physically handicapped inmates, a program for substance abuse, a high security unit, a specialized program for serious and violent offenders as a part of a re-entry program and a regional medical facility.

The Estelle Unit is designed to house 3148 offenders, the Estelle Unit provides an assortment of vocational activities for the offenders, to include: Painting, Carpentry and Construction, Horticulture, ServSafe Food Handlers Certification, EPS 608 HVAC Certifications and Masonry. The Unit has vocational certification programs through Windham Schools, OSHA, National Center for Construction Education and Research and Texas A&M University along with various educational classes consisting of but not limited to Computer, GED, and Microsoft Office Systems Certification to assist the offenders in rehabilitation and re-entry into society. Senior Warden Carter and his staff has recently added an Associate's Degree program through Lee University, the inmates are in their first semester of this program, at the time of this audit.

The Estelle Unit has three fulltime Chaplains that administers to the needs of the offender population as well as to any staff needs. Volunteer ministry services are also conducted at the Estelle Unit. The Estelle Unit has 370 active volunteers that was approved by the Texas Department of Criminal Justice. Though these volunteers are registered with the Estelle Unit, they may also volunteer at other TDCJ facilities.

The Unit has an on-site Regional Medical Facility that is staffed 24 hours daily with on-call emergency care that is available 24 hours a day. The Medical Facility has 211 medical staff personnel assigned to it, the Medical and Mental Health Program is provided by the University of Texas Medical Branch (UTMB). The Regional Medical Facility has an onsite Regional Digital Medical Services (DMS) system for electronic specialty clinics and on-site specialty medical services, such as Dialysis, Assistive Disability Services (ADS), Physical Therapy, Brace and Limb, Phototherapy, Audiology, Respiratory Therapy, Optometry, and oral surgery care. The Estelle Unit utilizes Huntsville Memorial Hospital for its primary SANE/SAFE forensic examinations, if the SANE/SAFE examiner is not available, the medical staff will use a SANE locator system called Utilize Review, which will locate the nearest SANE examiner on duty throughout the state of Texas.

The Estelle Unit has a pack dog training program that can track in large rural areas and assist the local law enforcement communities.

The Unit has twenty-four (24) buildings, ten (10) single cell housing areas and five (5) open dormitory housing areas. The Estelle Unit has a high security building with of five hundred-eighty-one (581) double-occupancy cells for Restrictive and Administrative (SVORI) program housing. Two chain link fences with razor wire surround the unit and other structures include administrative spaces, security towers, and maintenance. Security at the front gate provides control for all staff /visitor entry and exit and a rear gate for vehicle entrance. Access Control posts are located throughout the Unit and in each housing area. The unit has electronic equipment to monitor the Unit in specific areas.

The vast majority of inmates interviewed stated the Estelle Unit has a higher and safer quality of life since Senior Warden Christopher Carter and Assistant Warden Cliff Prestwood arrived approximately 7 months ago. The inmates stated the Wardens changed the atmosphere in the unit to a positive and respectful environment, they have established professional and respectful interactions between the staff and inmate population. In addition, they have made operational changes which provide more supervision to ensure a safe environment. The inmates also stated they can count on the Wardens to stop and listen to their issues during their daily tour of the Unit.
Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

Executive Directive - 03.03, dated March 31, 2015, outlines the Texas Department of Criminal Justice (TDCJ) Zero Tolerance Policy and established the Safe Prisons/PREA Plan. The Safe Prisons/PREA Plan directs that each Warden appoint a Unit Safe Prisons/PREA Manager to coordinate the implementation of the Safe Prisons/PREA Plan at each facility. The Safe Prisons/PREA Plan also defines prohibited behavior regarding sexual abuse and sexual harassment. The TDCJ employs an upper level Agency Wide PREA Coordinator with sufficient time and authority to develop, implement and oversee the agency efforts to comply with the PREA Standards.

Standard 115.12 Contracting with other entities for the confinement of 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)

The Auditor has reviewed the contracts awarded by TDCJ; all are appropriate and are in compliance with PREA standards. The Estelle Unit does not currently have any inmate being confined with other contracted entities.

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)

This finding is based on a review of the Administrative Directive (AD) 11.52, Security Staffing, dated March 4, 2016, the Unit Staffing Plan, Staffing Rosters and Post Orders, staff interviews and observations the Estelle Unit exceeds this standard.

TDCJ has developed and documented the staffing plans that provide adequate levels of staffing for the Estelle Unit. When deviations occur, they are properly documented, justified and explained. This auditor reviewed shift rosters and deviations were properly noted.

TDCJ has completed the required annual review of the staffing plans in consultation with the PREA Coordinator as required by standard 115.11, to assess, determine and document whether adjustments to the staffing plans are needed.

The Estelle Unit has exceeded this standard by providing overlapping fields of observation and eliminating all known “blind spots”. They accomplished this through the use of camera surveillance which is enhanced by having roving patrols whose observation capabilities are enhanced with outstanding placement and usage of mirrors; which is further enhanced by keeping windows and see-through wall partitions unencumbered for a large field of observation throughout the Unit.

Senior Warden Carter has also implemented a staff logbook system; a staff sign in logbook is placed throughout the unit and its outlying buildings. Staff are to sign their names in the logbooks as the patrol that area, different color ink pens are used to differentiate the rank of the person signing in for quick visual reference.
This system ensures that appropriate staff personnel are patrolling and supervising all areas of the unit every day and it eliminates the chance of missing an area or not providing an even level of supervision throughout the Unit.

**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)

**X Not Applicable** The Estelle Unit does not house Youthful Offenders.

**Standard 115.15 Limits to cross-gender viewing and searches**

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

This auditor has reviewed AD 03.23 Offender Searches, The Estelle Unit does allow cross gender strip searches of male inmates by female staff only after approval of a supervisor. The Cross Gender Search logs indicated there were zero (0) cross gender searches performed in the past twelve months. A review of building turnout rosters indicate the unannounced rounds are being made as required and annotated in a staff sign in logbook located throughout the Unit. TDCJ and Estelle policy required female correctional staff to announce their presence in each housing area every time they enter the area. This policy requirement is painted on all of the doors entering the housing areas and states in bold letters with contrasting colors “ATTENTION! YOU ARE NOW ENTERING A CROSS GENDER VIEWING AREA IN A MALE-HOUSING LOCATION ALL MEMBERS OF THE OPPOSITE GENDER MUST ANNOUNCE THEIR PRESENCE UPON ENTRY. In the housing units have showers with a half door design partitions and restroom areas with partitions that adequately block the view of people in the dayroom and walkways. In the high security building the cells have showers built into the cells so the offender can shower without leaving his cell or be seen by others outside of the cell. The unit had placed partitions in outside search areas to prevent viewing while conducting strip searches. In the restroom areas throughout the Unit, there are partitions and/or visual blocks across the bottom half of the windows to prevent viewing.

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

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

This auditor reviewed AD -04.25, AD-06.25, Security Manual(SM)-05.50, Training Report and Roster of Spanish Interpreters and review of provided materials in making the determination of compliance. The Estelle Unit provides assistance to those who are hard of hearing and Spanish interpreters to those who do not speak English. The inmates interviewed included the physically disabled and those who only spoke Spanish and appropriate interpreters were provided. The Estelle Unit takes appropriate steps to ensure inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Estelle Unit’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
There have been no instances in the past twelve months of the Estelle Unit using inmate interpreters to assist non-English speaking inmates with PREA related issues.

**Standard 115.17 Hiring and promotion decisions**

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

This finding is based on a review of Executive Directive (ED) PD-71, PD-73, PD-75, and PD-27, a review of hiring applications, pre-hiring questionnaires and interviews with the Human Resource Manager. The Estelle Unit does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates, who has engaged in sexual abuse in any criminal justice facility, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion. The Estelle Unit considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The Estelle Unit performs a criminal background records check before enlisting the services of any potential employee and contractor who may have contact with inmates. The TDCJ has established a flash notification process where if any staff member is apprehended by law enforcement and an NCIC check is conducted, the agency is immediately notified, as all staff fingerprints are on file.

**Standard 115.18 Upgrades to facilities and technologies**

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

The Estelle Unit has last upgraded their video system on February 26, 2016. The Security Memorandum (SM) 1.14, dated Sept 9, 2015, Operating and Monitoring Video Surveillance Systems, requires the Unit Administrator to ensure video surveillance systems are used to protect offenders against assault, extortion, and sexual abuse in accordance with the TDCJ Safe Prisons/PREA Plan.

This was considered in the upgrade of video equipment at the Estelle Unit. The TDCJ has contracted the purchase and installation of a new comprehensive video monitoring system for the Estelle Unit which has not been installed at the time of the audit. Currently the Estelle Unit uses well placed cameras and effectively placed mirrors, see through wall partitions/windows and security staffing to enhance the monitoring and safety surveillance.

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

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

This auditor reviewed AD-16.03, Safe Prisons/PREA Operations Manual (SPPOM)-05.01 Sexual Abuse Checklist, Correctional Managed Health Care (CMHC) G57.1, Solicitation Letter, and Safe Prisons/PREA Operations Manual (SPPOM)-02.02 Sexual Annual Victim Reports; Medical personnel were also interviewed as well as the OIG Investigator. To the extent that the Estelle Unit is responsible for investigating allegations of sexual abuse, they follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.
Staff was knowledgeable of this procedure during interviews. The Estelle Unit offers all victims of sexual abuse access to forensic medical examinations without financial cost, where evidentiary or medically appropriate. Such examinations are to be performed by Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. In the event a sexual abuse incident, the offender will be taken to the nearest hospital that has medical staff qualified to perform forensic medical exams, which is the Huntsville Memorial Hospital in Huntsville, Texas. If a SAFE examiner is not available, the medical staff will use the Utilize Review system to locate the nearest SANE/SAFE examiner on duty for that day, this system track throughout Texas. Noted: Texas Senate Bill 1191 states, “Victims of sexual assault who require a forensic exam will be taken to the nearest hospital emergency department for completion of the exam. State law requires that ER staff have specialized training to complete a forensic exam, but does not require that be SANE or SAFE training.” The Estelle Unit has not had to utilize a non-SANE/SAFE trained forensic examiner.

There have been no instances of forensic medical exams being conducted in the past twelve months. The Estelle Unit makes available to the victim a victim advocate from employees trained as offender/victim representatives. Mental/emotional services are available on-site.

TDCJ had issued a solicitation letter to victim advocacy groups in Texas and had no response. Recommend that TDCJ again attempt to recruit Rape Crisis Centers to assist them in support of this standard.

**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)

This finding is based on a review of policy SPPOM-05.05 and SPPOM-05.01, and interviews with the Office of Inspector General (OIG) investigator. Unit staff conducts the initial incident investigation and OIG determines if it meets the requirements for a criminal investigation. If the incident is deemed to be a felony, then OIG takes over the investigations.

The Estelle Unit ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

The Estelle Unit ensures that allegations of employee wrongdoing are referred for investigation to the OIG.

The Estelle Unit has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation and publishes such policy on its website.

The Estelle Unit documents all such referrals.

**Standard 115.31 Employee training**

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

This auditor reviewed the following documents in making the above decision. The Safe Prisons/PREA Program training and education is performed in accordance with the Correctional Training and Staff Development lesson plan, the SPPOM-06, ED-12.10, AD-12.20, ED PD-97 and the Safe Prisons/PREA Plan.
Employees interviewed were knowledgeable of their duties under the PREA program and all indicated that PREA is a reoccurring subject taught during turn out training on their shifts.

The following areas are covered in the PREA training received by staff: the TDCJ's zero tolerance policy on sexual abuse and sexual harassment; methods for fulfilling responsibilities under the TDCJ sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; the right of offenders to be free from sexual abuse and sexual harassment; the right of offenders and staff to be free from retaliation for reporting sexual abuse and sexual harassment; the characteristics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with offenders; how to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and the common characteristics of victims and predators, sometimes referred to as red flags.

All staff receives PREA training during in-service training annually. Staff acknowledge in writing they receive and understand the training.

**Standard 115.32 Volunteer and contractor training**

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

Based on a review of the training curriculum, Volunteer Handbook, Safe Prisons/PREA Plan and Volunteer Acknowledgement forms, the volunteers and contractors at the Estelle Unit are receiving the required training on sexual assault and sexual harassment. The Estelle Unit ensures all volunteers and contractors who have contact with offenders have been trained regarding sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The Estelle Unit ensures all volunteers and contractors who have contact with offenders have been notified of the TDCJ’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures for reporting incidents. The contractors and volunteers who were interviewed were aware of PREA and their duties and responsibilities. All contractors and volunteers had received initial PREA training during their initial training.

TDCJ requires volunteers to attend training at least every two years; The Estelle Unit has approximately three hundred seventy (370) active volunteers.

**Standard 115.33 Offender Education**

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

In making the above decision this auditor reviewed the TDCJ Unit Classification Procedure Manual (UCPM) 5.0, dated June 2012, Safe Prisons/PREA Plan, CMHC Policy G-51.1, G-51.5, Administrative Directive (AD)-04.25, and AD-06.25. Inmate education is being delivered by the Estelle Unit to all newly arriving inmates within the thirty days as required. Information on the Zero tolerance policy, how to report sexual abuse and sexual harassment is being provided during the initial intake process.
Inmates are receiving the required comprehensive PREA education within 30 days of intake; offenders are provided this comprehensive education either in person or through video regarding their rights to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. PREA Posters are in the housing units, in all entry ways throughout the Unit and the information is in the inmate handbook. Information is available in Spanish for those who do not understand English. The comprehensive education is reinforced during the Classification process where inmates are interviewed by Unit Safe Prison Personnel. Offenders are provided education in formats accessible to all offenders, including those who are limited English proficient, hard of hearing, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills. Inmates interviewed were aware of the TDCJ’s Zero Tolerance policy and acknowledged they had received PREA training during orientation or within 30 days of the implementation of PREA if confined prior to August 20, 2012. The Estelle Unit does have disabled and deaf inmates in the population.

**Standard 115.34 Specialized training: Investigations**

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


Specialized training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. TDCJ maintains documentation that agency investigators have received and completed the training in conducting sexual abuse investigations.

This Specialized training was in addition to the mandatory training requirements for sexual assault investigations. OIG investigators receive in-service training that specifically relates to sexual assaults within confinement setting.

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

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

This auditor has reviewed CMHC Policies C-19.1, C25.1 and C 57.1. Also reviewed was the Medical/Mental Health Training. The Estelle Unit has ensured that all fulltime and any part-time medical and dental health care practitioners who work regularly in its facilities have been trained in: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Appropriate documentation is maintained to show that medical, mental health and dental staff has received this training in addition to the training required for employees, contractors, and volunteers. Mental health services are provided on-site.
Standard 115.41 Screening for risk of victimization and abusiveness

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

This auditor has reviewed the SPPOM-03.01, and the PREA Screening Assessment Instrument. Additionally, interviews with Classification staff and inmates, both formal and informal, were conducted. The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the TDCJ, in assessing offenders for risk of being sexually abusive.

An objective screening tool is used to record these initial assessments. The intake screening includes, at a minimum, the following criteria to assess offenders for risk of sexual victimization: any mental, physical, or developmental disability; the age of the offender; the physical build of the offender; previous incarceration; whether the criminal history is exclusively nonviolent; prior convictions for sex offenses against an adult or child; perception of the offender as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; previous sexual victimization; the offender’s own perception of vulnerability. The inmate’s age, physical stature and the information previously stated are used at the Estelle Unit to ensure a safe and racially blended living environment.

Standard 115.42 Use of screening information

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

In making the above determination, this auditor has reviewed AD-04.14, Offender Housing Assignments, Ad-04.18, Offenders Job Assignments, Safe Prisons/PREA Plan, SPPOM-03.01 Special Population Review and inmate interviews.

Decisions are made on an individual case by case basis in determining the housing and job assignment of each offender. Offender are housed in such a manner so as to ensure, to the maximum extent possible, the safety, security and treatment needs of all offenders are being met, as well as to maintain the safety and security of the public, staff, and the unit/facility.

The Estelle Unit Classification personnel uses information from the risk assessment screening document to make housing, bed, work, education, and program assignments with the goal of separating offenders at high risk of being sexually victimized from offenders at high risk of being sexually abusive.

The requirement for semi-annual review of placement and programming assignments for transgender or intersex offender is outlined in the Safe Prison/PREA Plan. A transgender or intersex offender’s views with respect to his or her own safety shall be given serious consideration. Offenders identified as transgender or intersex is being given the opportunity to shower and be strip searched separately from other 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)

In making the above determination, this auditor has reviewed the SPPOM-05.05, Ad SEG Plan, I-169 Form and I-201, Guidelines for ASC Members, the Safe Prisons/PREA Plan, and interview with Unit Safe Prisons/PREA Manager.

At the Estelle Unit no inmates at high risk for sexual victimization will be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If the Unit cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Any inmates placed in segregated housing for this purpose will have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document the reasons the inmate was restricted from program access.

No inmates have been placed in involuntary protective custody in the past twelve months at the Estelle Unit.

Standard 115.51 Offender 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)

This auditor reviewed ED-02.10 PREA Complaints and Inquiries, Safe Prison Plan, Section IV, Reporting Allegations, General Information Guide for Families, AD 14.09 Postage & Correspondence, the PREA Brochure published by the PREA Ombudsman and interviews with random staff and inmates. Inmates and/or staff can report abuse or harassment to the PREA Ombudsman or the Office of the Inspector General.

The Estelle Unit provides multiple ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse, and staff neglect or violations or responsibilities that contribute to such incidents. Hotline phone numbers are posted at every inmate phone, however, the inmates cannot use the number themselves due to the phone system used at this Unit, the inmates can send the number to a third party to report on their behalf. Inmates are provided at least one way to report abuse or harassment to an entity that is not part of the Estelle Unit. Inmates can report abuse or harassment to the PREA Ombudsman, an external entity and a third party via visitation or the mail system. Staff accept reports made verbally, in writing, anonymously or from third parties and promptly documents verbal reports. The Estelle Unit does not hold any inmates solely for civil immigration purposes.

Standard 115.52 Exhaustion of administrative remedies

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

In making this decision this auditor reviewed AD-03.77, AD-03.82, OGOM 1.01, Safe Prisons/PREA Plan and interviews with staff and inmates.
The Estelle Unit does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse, nor require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Inmates who allege sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. The Estelle Unit shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The Estelle Unit policy and practice complies with all remaining aspects of PREA standard 115.52.

**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)

This auditor has reviewed Board Policy (BP) 03.91, the Safe Prisons/PREA Plan, SPPOM 02.02 and the solicitation letter. Additionally, interviews were conducted with random inmates. The Estelle Unit provides access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and in the law library and provides them support services from the on-site mental health staff. The Estelle Unit allows reasonable written or video communication between offenders and these organizations and agencies, in as confidential a manner as possible. The Estelle Unit informs inmates, prior to giving them access, of the extent to which these communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. There is a comprehensive list of Rape Crisis Centers available to the inmate in the law library.

**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)

The Estelle Unit meets this standard. This is based on a review of policies ED 02.03, ED 02.10, SPPOM 04.02, The General Information Guide for Families Offenders and the Safe Prisons/PREA Plan. The Estelle Unit has a system in place to receive third party reports of sexual abuse or reassessment and distributes publicly, information on how to report sexual abuse or harassment of behalf of inmates.

**Standard 115.61 Staff and agency reporting duties**

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

This decision of compliance was based on a review of AD 16.20, ED PD-29, CMHC E-35.02, G-57.01, the Safe Prisons Plan/PREA Plan and interviews with random staff, the Unit Safe Prisons/PREA Manager, mental health staff and medical staff interviews by auditor. Staff was knowledgeable of their duties to report all instances outlined in this standard.

The Estelle Unit require staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility, whether or not it is part of the unit; retaliation against inmates or staff who reported an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Additionally, staff are prohibited form revealing any information related to sexual abuse reporting to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigations, and other security and management decisions.

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Standard 115.62 Agency protection duties

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

This determination is based on a review of SPPOM 05.01, SPPOM 05.03 and interviews with staff and the Unit Safe Prisons/PREA Manager. Staff interviewed responded appropriately of their duties to immediately protect the inmate.

Standard 115.63 Reporting to other confinement facilities

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

This auditor has reviewed AD-16.20, SPPOM-04.01, SPPOM-04.02BP-02.09, BP-01.07, Safe Prisons/PREA Plan, interviews with Unit Safe Prisons/PREA Manager and the Warden. Upon receiving an allegation that an offender was sexually abused while confined at another facility, the Senior Warden or designee notifies the head of the facility or appropriate office of the agency where the alleged incident occurred. This is done as soon as possible, but no later than 72 hours after receiving the allegation and all actions are documented. This notification is documented.

Standard 115.64 Staff first responder duties

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

Based on a review of AD-16.03, OIG OPM-04.05, SPPOM-05.01 and interviews with security and non-security staff, Estelle Unit met this standard. Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond separates the alleged victim and abuser; preserves and protects any crime scene until appropriate steps can be taken to collect any evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating. If the first staff responder is not a security staff member, the responder request that the alleged victim not take any actions that could destroy physical evidence, and then notifies security staff.

Interviews with security and non-security staff indicated that staff was knowledgeable of their responsibilities under this standard.
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)

In making the decision of compliance this auditor reviewed the Safe Prisons/PREA Plan, SPPOM-05.01, interviews with staff and the Unit Safe Prison/PREA Manager.

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)

X Not Applicable TDCJ and the Estelle Unit does not participate in collective bargaining.

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)

Based on policy PD-22, PD-29, PD-31, PD-13, and SPPOM-05.08, the Safe Prisons/PREA Plan, interviews with the Senior Warden and the PREA Compliance Manager who is the designated staff member responsible for monitoring retaliation.

The Estelle Unit have a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperates with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and designates the PREA Compliance Manager with monitoring retaliation.

The Estelle Unit have multiple protection measures available, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, the Estelle Unit takes appropriate measures to protect that individual against retaliation

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 decision of compliance was made based on a review of the Safe Prisons/PREA Plan, AD-04.63, AD-03.50, the Administrative Segregation Plan, interviews with the Safe Prisons/PREA Manager and the Senior Warden.
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)

In making the above decision, this auditor reviewed AD-02.15, AD 16.03, OIG Lesson Plan (OIG LP 3201) Sexual Assault Investigative Topics, OIG Operations Procedure Manual(OPM)-02.15, OPM-03.72, OP-04.05, and the Safe Prison/PREA Plan, The Estelle Unit conduct investigations promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Where sexual abuse is alleged, investigators who have received special training in sexual abuse investigations conduct these investigations.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, OIG conducts compelled interviews only after consulting with prosecutors.

The Estelle Unit conducts investigations promptly, thoroughly, and objectively for all allegations of sexual abuse, including third-party and anonymous reports. Where sexual abuse is alleged, investigators who have received special training in sexual abuse investigations conduct these investigations.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, OIG conducts compelled interviews only after consulting with prosecutors.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person’s status as inmate or staff. Neither the Estelle Unit nor TDCJ requires an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution.

The Estelle Unit retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The departure of the alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation.

Standard 115.72 Evidentiary standard for administrative investigations

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

This auditor reviewed CTSD Lesson Plan for the Specialized Investigations Training, the Safe Prisons/PREA Plan and interviews with unit investigators and OIG investigators in making this determination. The Estelle Unit imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The “preponderance of the evidence” means that more than 50% of the evidence supports the allegation.
Standard 115.73 Reporting to 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)

This auditor reviewed the Safe Prisons/PREA Plan, SPPOM-05.05, 05-10, 05-11, completed investigations documenting inmate notifications and interviews with the unit and OIG investigators in making the above determination.

Following an investigation into an offender allegation that he was victim of any criminal sexual assault offense the offender is informed as to whether the investigative finding was substantiated (sent to prosecution/sustained), unsubstantiated (administratively closed/not-sustained), or unfounded. Additionally, the offender victim shall be notified following the suspect assailant indictment or conviction on the related charge. This notification is made in writing.

In the past 12 months, .02% of the Estelle Unit inmate population made allegations of sexual abuse, 49% of those allegations were investigated and determined to be unfounded, the remaining allegations were investigated and determined to be unsubstantiated and zero allegations were substantiated at the time of this audit, one case is pending closure.

Standard 115.76 Disciplinary sanctions for staff

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

This decision was based on a review of AD-16.20, ED PD-13, PD-29 and PD-22. Sexual misconduct with an inmate is a level 1 violation under Texas PD-22, General Rules of Conduct and Disciplinary Action Guidelines for Employees and dismissal from employment is the recommended course of action for level 1 violations. All terminations for violations of the agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past twelve months no staff members had been determined to violate the sexual abuse of inmates’ policy of the TDCJ.

Standard 115.77 Corrective action for contractors and volunteers

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

In making the above decision this auditor reviewed ED PD-29, Volunteer Services Plan, the Volunteer Training Facilitators Guide, the Safe Prisons/PREA Plan, volunteer and contractor training files, and interviews with volunteers and contractors. TDCJ Policy clearly states that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to applicable law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

The Estelle Unit 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.
Volunteers are prohibited from establishing or continuing in personal relationships with offenders, including engaging in, or attempting to engage in, any form of consensual sexual misconduct with offenders, including forcing or attempting to force offenders to participate in nonconsensual sexual misconduct. It is a felony offense if anyone, including a volunteer, at a TDCJ facility violates the rights of a person in custody or engages in sexual contact or sexual intercourse with a person in custody. Volunteers who violate the policy shall not be allowed to continue to perform services for the agency and may be subject to criminal prosecution. In the past twelve months there have been no reported violations by either contractors or volunteers.

**Standard 115.78 Disciplinary sanctions for 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)

The above decision was based on a review of CMHC E-35.1, Overview of Sex Offender Treatment Program (SOTP)-01.01, Safe Prisons PREA Plan, and interview with the OIG investigator.

Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

The sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary process considers whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

The Estelle Unit prohibits all sexual activity between inmates and may discipline inmates for such activity. There has not been a report of inmate on inmate sexual abuse in the last twelve months.

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

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

In making this determination this auditor reviewed the Safe Prison/PREA Plan, CMHC A-09.01, H-61.1, I-70.1, Policies E-35.1, 35.2, G-57, a review of intake medical intake documentation well as interviews with intake and medical staff.

If the screening indicates an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensured the offender was offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.
Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and on-site mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

**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 above decision was based on a review of CMHC A-01.1, CMHC G-57.1, SPPOM-05.01 and audit interviews with medical staff. Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and on-site mental health practitioners according to their professional judgment. If no qualified medical practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and are to immediately notify the appropriate medical and on-site mental health practitioners. Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

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

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

The above decision is based on a review of the Safe Prison/PREA Plan, SPPOM-05.01, SPPOM-05.05, CMHC G-57.1, E-44.1, and interviews with medical/mental health staff and PREA related incidents. The Estelle Unit offers medical and mental health evaluation by medical staff or on-site mental health practitioners and, as appropriate, treatment to all inmates who have been victimized by sexual abuse while incarcerated. The evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The Estelle Unit provides such victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

**Standard 115.86 Sexual abuse incident reviews**

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

In making the above determination, this auditor reviewed the Safe Prisons/PREA Plan, SPPOM-08.01, AD-02.01, completed Incident Review reports and interviews with the Senior Warden and the Safe Prisons/PREA Manager.
An administrative review is completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined unfounded. The Senior Warden shall obtain input from security supervisors, investigators, and medical practitioners when completing the review. The review is conducted within thirty days of the conclusion of the investigation. The Estelle Unit review team includes upper-level management, with input from line supervisors, investigators, and medical or on-site mental health practitioners. The Estelle Unit implements recommendations that result from these reviews, or documents the reasons why they don’t implement the recommendations.

**Standard 115.87 Data collection**

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

In making the above decision, this auditor reviewed SPPOM-01.01, BP-02.09, OIG OPM-04.05, the Safe Prison PREA Plan and interview with the Senior Warden, uniform data is collected for every incident of sexual abuse alleged to have occurred at the Estelle Unit using a standardized instrument and set of definitions.

Incident-based sexual abuse data is aggregated annually. The incident-based data collected is based, at a minimum, on information necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The PREA Ombudsman maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. TDCJ also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

**Standard 115.88 Data review for corrective action**

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

This auditor reviewed the Safe Prison/PREA Plan, PREA Ombudsman Safe Prison Program Annual Report SOP, and the interview with the Safe Prisons/PREA Manager and Senior Warden in making the above determination of compliance. Each calendar year, the PREA ombudsman, in coordination with the TDCJ and the OIG, submits a written report regarding the activities of the PREA ombudsman during the preceding year. The report includes public information regarding statistical information regarding the total number of allegations of sexual assault investigated by the department, the outcome of the investigations, and any disciplinary sanctions imposed as a result of the investigations.

In accordance with PREA National Standard §115.88, the report includes: areas identified by facilities as needing corrective action; a summary of the corrective action taken for each facility where corrective action needed has been identified; a comparison of the current years’ data and corrective actions with those from prior years, and an assessment of TDCJ’s progress in addressing sexual abuse.
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)

This auditor reviewed the PREA Ombudsman, TDCJ, OIG Annual Report and the State Records Retention policy in making this decision of compliance. TDCJ makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually. All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires.

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 Offender or staff member, except where the names of administrative personnel are specifically requested in the report template.

Marc L. Coudriet
3/17/2017

Auditor Signature Date