

PREA AUDIT REPORT INTERIM FINAL

ADULT PRISONS & JAILS



Auditor Information			
Auditor name: Robert B. Ezell			
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Email: rbezell@msn.com			
Telephone number: 405-659-8970			
Date of facility visit: 14-17 March 2016			
Facility name: East & West Garza Units			
Facility physical address: 4304 Hwy 202, Beeville, TX 78102 / 4250 Hwy 202, Beeville, TX 78102			
Facility mailing address: (if different from above)			
Facility telephone number: 361-358-9880 / 361-358-9890			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Bryan Gordy			
Number of staff assigned to the facility in the last 12 months: 404/434			
Designed facility capacity: 2458/2278			
Current population of facility: 2348/2111			
Facility security levels/inmate custody levels: G1-G3, Outside Trustee, Transient			
Age range of the population: 18-72/18-72			
Name of PREA Compliance Manager: Roberto Gonzales		Title:	Unit Safe Prisons/ PREA Manager
Email address: Roberto.Gonzales@tdcj.texas.gov		Telephone number:	361-358-9890
Name of agency: Texas Department of Criminal Justice			
Governing authority or parent agency: (if applicable) State of Texas			
Physical address: 861-B I-45 North, Huntsville, TX 77320			
Mailing address: (if different from above) P.O. Box 99, Huntsville, TX 77342			

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

AUDIT FINDINGS

NARRATIVE

The PREA Audit of Garza East and West Units, Texas Department of Criminal Justice (TDCJ), was conducted on March 14-17, 2016, by United States Department of Justice Certified PREA Auditors Robert B. Ezell, Lead Auditor, Marc Coudriet and Barb Denison, team members. Prior to the audit, the Garza Units 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 Garza Units. The audit was coordinated through the American Correctional Association, Alexandria, Virginia.

An entrance briefing was conducted at 8:00 AM in building 2006 and the following personnel were in attendance:

- Joe Grimes, Director, Region IV
- Bryan Gordy-Garza Complex Senior Warden
- Jerry Rayford-Garza East Assistant Warden
- Ronnie Perez-Garza West Assistant Warden
- Major Brian Clark-Garza West
- Major Daniel Fernandez-Garza East
- Sgt. Robert S. Gonzales-Garza West/Garza East Safe Prisons/PREA Manager
- Sgt. Harry Sanchez-Region IV Safe Prisons

There were twenty-seven (27) additional staff members in attendance as this was a joint entrance briefing along with the ACA Re-Accreditation team that was simultaneously conducting their audit.

The team started with a tour of the Garza East Unit immediately at the conclusion of the entrance briefing. The following staff accompanied the team on the tour: Joe Grimes, Director, Region IV, Jerry Rayford-Garza East Assistant Warden, Captain R. Lopez, Lieutenant Rosalinda Trevino, Sgt. Robert S. Gonzales-Garza West/Garza East Safe Prisons/PREA Manager, Sgt. Harry Sanchez-Region IV Safe Prisons and Sgt. Melissa Bernal. All areas of the East Unit were toured including, intake, all inmate housing units, segregation, a small medical area, food service, education, law library, work areas and the recreation areas. The W6 Work Camp which is also under the supervision of Garza East was also toured. During the tour of Garza East and the Work Camp, the audit team informally interviewed forty-eight (48) staff and fifty-one (51) inmates.

After lunch the team went to the West Unit, which is the primary reception unit for Region IV and in processed in excess of eleven thousand inmates during the past twelve months. The following staff accompanied the team on the tour of the West Unit: Joe Grimes, Director, Region IV, Jerry Rayford-Garza East Assistant Warden, Captain R. Lopez, Captain C. Gonzales, Lieutenant Rosalinda Trevino, Sgt. Robert S. Gonzales-Garza West/Garza East Safe Prisons/PREA Manager, Sgt. Harry Sanchez-Region IV Safe Prisons and Sgt. Melissa Bernal. All areas of the West Unit were toured including, intake, all inmate housing units, the W building, segregation, the compound main medical and mental health areas, food service, education, law library, work areas and the recreation areas. During the tour of Garza West, thirty-two staff (32) and fourteen (14) inmates were informally interviewed.

On Tuesday the audit team conducted formal interviews with thirty-one staff (31) and twenty-five (25) inmates on Garza East and on Wednesday the team conducted formal interviews with thirty-three (33) staff and fifty-one (51) inmates on Garza West. Formal interviews were conducted with staff from all shifts from Garza East, West and the Work Camp. During the audit a total of one hundred forty-four (144) staff and one hundred thirty-one inmates (131) were formally or informally interviewed. Formal interviews were conducted utilizing the PREA questionnaires with the following facility staff: 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.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Raul R. Garza Correctional Complex is located near Beeville, Texas on Chase Field, formerly used by the United States Navy as an Auxiliary Air Station.

The 286-acre site includes the Region IV Offices for the Texas Department of Criminal Justice (TDCJ), the Garza East Unit, the Garza West Unit, and a Trusty Camp. The Garza East, Garza West, and the Trusty Camp compose the Raul R Garza Correctional Complex.

The Garza Units are managed by a single Senior Warden and two Assistant Wardens. The Garza East Unit, opened in February, 1994, is a transfer facility composed of nine dormitory buildings and a 50 cell building for Administrative Segregation. Each of the nine dorms has 4 pods of 54 offenders. The Unit also has a separate 480 bed Work Camp that provides offender work details for the TDCJ Regional maintenance and other work details outside the fenced perimeters.

The Garza West Unit was opened in May, 1994, has nine dormitory buildings (each have 4 pods with 54 offenders), 50 cell building for Administrative Segregation, a dormitory that can hold 300 offenders and a medium security dormitory of four pods with 50 offenders each. The Unit provides offender Intake/Receiving, Substance Abuse Screening, and Assessment programs. This facility is the Region IV intake facility for TDCJ. Offenders are received directly from the courts, through the counties if they have been sentenced to TDCJ.

Two chain link fences with razor wire surround each of the units and there is an evening roving patrol to service both perimeters. Other structures include education spaces, medical services, food service, maintenance, recreation, chapel, and central control. Each unit has its own visitor processing center, located

at the front gate that provides control for all staff /visitor entry and exit and a rear gate for vehicle entrance. Control centers are located in each unit with electronic equipment to monitor the facilities.

The Garza Units offers educational programs sponsored by the Windham School System that includes academic and vocational opportunities to eligible offenders. The School was on Spring Break during the audit. The Medical and Mental Health Program is provided by the University of Texas Medical Branch (UTMB).

SUMMARY OF AUDIT FINDINGS

Both East and West Garza Units are of the identical design for the main inmate housing units and gymnasiums. When entering the inmate gymnasiums, the urinal was in open view. The unit had placed a partition blocking the view of the commodes, but not the urinals. This was the case on both the East as well as the West Unit. The partition was repositioned to block the view of the urinals and commodes prior to the end of the on-site audit on both East and West Units.

In each housing POD there are two identical shower and restroom areas opening directly into the day rooms of the units. The Unit had placed a partition to prevent viewing two commodes on one side of the double inmate bathroom and shower area. This left the entire restroom on one side open to viewing and the urinals on the other open to viewing. After some discussion, the plan was to reposition the partition on one side to block viewing of both the urinals and commodes and to fabricate additional partitions to place on the other side. This auditor has been provided sufficient photographic proof that these have been installed in all housing units.

In the W Building on the Garza West Unit, which is also an inmate housing unit consisting of multiple smaller size units. The commode sits at the back of the unit and is not directly viewable from the front side of the unit. However, there is a pipe chase that circles the back side of the housing units and staff is required to make rounds through this chase. The commode is visible to the officer making rounds from this chase. The unit has hung coverings on the rear side of the chase, limiting the view of the commodes. This auditor has been provided sufficient photographic proof that these have been installed.

A review of Building turnout rosters indicate the unannounced rounds are being made as required. However, TDCJ policy required female correctional staff to only knock and announce their presence in each housing dorms at the beginning of their shift and re-announce only if they leave the building and return. They could reenter the dorm numerous times without having to re-announce their presence. This did not meet the intent of the standard.

The Garza Units published a new Standard Operating Procedure 03.28, dated April 7, 2016, changing the above Knock and Announce process to where opposite gender staff announce their presence whenever entering a dorm and the gender make up of the dorm changes. Training on this new process has taken place with all departments and shifts. This auditor has been provided a copy of the new process as well as training sign in rosters for shifts and departments on both the East and West Units.

Number of standards exceeded: 1

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 3

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

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 inmates

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

X Not Applicable The Garza Units do not contract inmates to other jurisdictions.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

This finding is based on a review of the Administrative Directive(AD) 11.52, Security Staffing, dated Aug 12, 2013, the Unit Staffing Plan, Staffing Rosters and Post Orders, staff interviews and observations the Garza Units meets this standard.

TDCJ has developed and documented the staffing plans that provides adequate levels of staffing for the Garza Units. 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 asses, determine and document whether adjustments to the staffing plans are needed.

Standard 115.14 Youthful inmates

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

X Not Applicable The Garza Units do 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

This auditor has reviewed AD 03.23 Offender Searches. The Garza Units does allow cross gender strip searches of male inmates by female staff only after approval of a supervisor. The Cross Gender Search logs indicated the six (6) cross gender searches were performed on Garza East and thirteen (13) on Garza West in the past twelve months.

A review of Building turnout rosters indicate the unannounced rounds are being made as required. However, TDCJ policy required female correctional staff to only announce their presence in each housing POD at the beginning of their shift and re-announce if they leave the building and return. They can reenter the POD without announcing their presence numerous times without having to announce their presence. This does not meet the intent of the standard.

The Garza Units published a new Standard Operating Procedure changing the Knock and Announce process to where opposite gender staff announce their presence whenever entering a dorm and the gender make up of the dorm changes. Training on this new process has taken place with all departments and shifts. This auditor has been provided a copy of the new process as well as training sign in rosters.

Both East and West Garza Units are of the identical design for the main inmate housing units and gymnasiums. When entering the inmate gymnasiums, the urinal was in open view. The unit had placed a partition blocking the view of the commodes, but not the urinal. This was the case on both the East as well as the West Unit. The partition was repositioned to block the view of the urinals prior to the end of the audit on both East and West Units.

In the housing units each housing POD there are two identical shower and restroom areas opening directly into the dayroom. The unit had placed a partition to prevent viewing two commodes on one side of the double inmate bathroom and shower area. This left the

entire restroom on one side open to viewing and the urinals on the other open to viewing. After some discussion, the plan was to reposition the partition on one side to block viewing of both the urinals and commodes and to fabricate additional barriers to place on the other side. This auditor has been provided sufficient photographic proof that these have been installed.

In the W Building, which is also an inmate housing unit consisting of multiple smaller size units. The commode sits at the back of the unit and is not directly viewable from the front side of the unit. However, there is a pipe chase that circles the back side of the housing units and staff is required to make rounds through this chase. The commode is visible to the officer making rounds from this chase. The unit has hung coverings on the rear side of the chase, limiting the view of the commodes. This auditor has been provided sufficient photographic proof that these have been installed.

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

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units provides both sign language assistance to those who are deaf or hard of hearing and Spanish interpreters to those who do not speak English. The inmates interviewed included several who only spoke Spanish and appropriate interpreters were provided.

The Garza Units takes appropriate steps to ensure inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Garza 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 Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 Garza Units 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 Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

The Garza Units has upgraded their video system since Aug 20, 2012. 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 Garza Units.

Standard 115.21 Evidence protocol and forensic medical examinations

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units are 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 were knowledgeable of this procedure during interviews.

The Garza Units 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 qualified medical practitioner is not available at the Garza Units, the offender will be taken to the nearest Hospital Emergency Department that has medical staff qualified to perform forensic medical exams. There have been no instances of forensic medical exams being conducted in the past twelve months.

The Garza Units makes available to the victim a victim advocate from employees trained as offender/victim representatives. In 2014, 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The Garza Units ensures that allegations of employee wrongdoing are referred for investigation to the OIG.

The Garza Units have a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation and publishes such policy on its website. The Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 receive 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

Based on a review of the training curriculum, Volunteer Handbook, Safe Prisons/PREA Plan and Volunteer Acknowledgement forms, the volunteers and contractors at the Garza Units are receiving the required training on sexual assault and sexual harassment.

The Garza Units 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 Garza Units 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, approximately forty (40) volunteers were out of compliance with this requirement. These volunteers had missed previously scheduled trainings. The Garza Units had already notified those out of compliance and scheduled the required volunteer training.

Standard 115.33 Inmate education

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

In making the above decision this auditor reviewed the TDCJ, Unit Classification Procedure Manual(UCPM) 5.0, dated June 2013, 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 Garza Unit's 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 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, deaf, 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.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

This auditor reviewed Board Policy (BP)-01.07, Correctional Training & Staff Development (CTSD) Specialized Investigations, Office of the Inspector General (OIG) Lesson Plans 3201, OIG Operations Procedure Manual(OPM) -02.15 and related sing in sheets.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

This auditor has reviewed CMHC Policies C-19.1, C25.1 and C 57.1. Also reviewed was the Medical/Mental Health Training.

The Garza Units have ensured that all full- and part-time medical and mental 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 and mental health staff have received this training in addition to the training required for employees, contractors, and volunteers.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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

In providing documentation to support the reassessment within thirty days, the staff spent an inordinate amount of time and energy to find the correct documentation.

Recommend the following actions:

- Revise section III, B, 4, of the Safe Prisons/PREA Plan and designate, by title, who is responsible for conducting the required reassessment
- Add another section on the Safe Prisons/PREA Program Offender Assessment Screening form to capture the reassessment date, staff signature and inmate signature. This would allow one form to capture all necessary information.

Standard 115.42 Use of screening information

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units Classification Committees 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 are being given the opportunity to shower 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 inmates was restricted from program access.

No inmates have been placed in involuntary protective custody in the past twelve months at the Garza Units.

Standard 115.51 Inmate reporting

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 printed on the Inmate PREA Brochure and the General Information Guide for Families.

Inmates are provided at least one way to report abuse or harassment to an entity that is not part of the Garza Units. Inmates can report abuse or harassment to the PREA

Ombudsman, an external entity. Staff accept reports made verbally, in writing, anonymously or from third parties and promptly documents verbal reports.

The Garza Units do 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units do 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 alleges 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 Garza Units 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 Garza Units policy and practice complies with all remaining aspects of PREA standard 115.52.

Standard 115.53 Inmate access to outside confidential support services

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

- Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units provides access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers in the law library. The Garza Units allows reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible.

The Garza Units 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. However, that fact is not known by most of the inmates interviewed.

Recommend the following be completed to better inform the inmate population of it availability:

- Include information in the Peer Education Training class on the availability of this list in the law library.
- Include information that there is a list of Rape Crisis Center available in the law library in the inmate handbook.

Standard 115.54 Third-party reporting

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

The Garza Units meet 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 Garza Units have 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 and medical/mental health staff interviews by audit team members.

Staff were knowledgeable of their duties to report all instances outlined in this standard.

The Garza Units 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 from 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.

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

Based on a review of AD-16.03, OIG OPM-04.05, SPPOM-05.01 and interviews with security and non-security staff, Garza Units meet 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, smoking, 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 were 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 relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 inmates from contact with abusers

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

- X** **Not Applicable** TDCJ and the Garza Units do not participate in collective bargaining.

Standard 115.67 Agency protection against retaliation

- 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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

The Garza Units 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 Garza Units 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 Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Manger and the 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 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 Garza Units 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 Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 inmates

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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.

Standard 115.76 Disciplinary sanctions for staff

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units 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 inmates

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Garza Units prohibits all sexual activity between inmates and may discipline inmates for such activity.

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

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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, medical and mental health 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 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

The above decision was based on a review of CMHC A-01.1, CMHC G-57.1, SPPOM-05.01 and audit team interviews with medical and mental health 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 mental health practitioners according to their professional judgment. If no qualified medical or mental health 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 immediately notify the appropriate medical and 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

The above decision is based on a review of the Safe Prison/PREA 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 Garza Units offers medical and mental health evaluation 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 Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 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 Warden shall obtain input from security supervisors, investigators, and medical or mental health practitioners when completing the review. The review is conducted within thirty days of the conclusion of the

investigation. The Garza Unit review team includes upper-level management, with input from line supervisors, investigators, and medical or mental health practitioners. The Garza Unit implement recommendations that result from these reviews, or documents the reasons why.

Standard 115.87 Data collection

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

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 Warden

Accurate, uniform data is collected for every incident of sexual abuse alleged to have occurred at the Garza Units 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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 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)

Auditor comments, including corrective action needed if not meeting the standard the facility does not meet standard.

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:

- X The contents of this report are accurate to the best of my knowledge.
- X No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- X 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.



Robert B. Ezell
Auditor Signature



Date