### Name of facility: Goodman Unit

### Physical address: 349 Private Road 8430, Jasper, Texas 75951

### Date report submitted: August 29, 2014

### Address: P.O Box 296

### Email: jpallen@lighthouse.net

### Telephone Number: 906-298-1339

### Date of facility visit: August 25-27, 2014

### Facility mailing address: 349 Private Road 8430, Jasper, Texas 75951

### Telephone number: 409-383-0012

### The facility is:
- [ ] Military
- [ ] County
- [ ] Federal
- [ ] Private for profit
- [ ] Municipal
- [x] State
- [ ] Private not for profit

### Facility Type:
- [ ] Jail
- [x] Prison

### Name of PREA Compliance Manager: Bryant, Terry

### Title: Sergeant

### Email address: Terry.Bryant@tdcj.texas.gov

### Telephone number: 409-383-0012

### Name of agency: Texas Department of Criminal Justice

### Governing authority or parent agency: State of Texas

### Physical address: 861-BI-45 North, Huntsville, Texas 77320

### Mailing address: P.O. Box 99, Huntsville, Texas 77342

### Telephone number: 936-295-6371

### Agency Chief Executive Officer

### Name: Brad Livingston

### Title: Executive Director
AUDIT FINDINGS

NARRATIVE:

On August 25 – 27, 2014, an audit was conducted at the Glen Ray Goodman Unit – Jasper, Texas, to determine compliance with the Prison Rape Elimination Act standards finalized August 2012.

The Goodman Unit is located approximately 3 miles east of Highway 96 in Jasper, Texas. The unit sits on 494 acres and houses 612 offenders. The operations of the facility consist of a Maintenance Department, Field and Agriculture Operations, Food and Laundry Services and Community Service Operations.

A complete tour of the facility was conducted on August 25, 2014. The following areas and operations were visited and observed: Inmate living areas, medical operations, admission & discharge, education areas, food service, facility maintenance operations, records, and administrative areas.

Documents that were reviewed pre-audit, and during the audit include Policies, Institutional Supplements, Staff training Records, Personnel Files, Volunteer Training Records, Training Curriculums, and Sexual Abuse and/or Harassment complaints. Formal Interviews were scheduled through random selection of staff and inmates from schedules and rosters provided by the staff prior to the commencement of the audit. Interviews were conducted with the following: A telephone interview was conducted with a designee for the Agency Head, and the Agency PREA Compliance Coordinator, and on site interviews were conducted with the Warden, PREA Compliance Manager/Coordinator (Facility), four Medical Care Staff, one Volunteer, Human Resources Manager, Corrections Staff from all shifts and all areas of the facility, (three on the morning shift, three on the evening shift, and 2 on the night shift), Supervisors, Investigators from the facility as well as from the regional office, staff who conduct intake screenings of inmates, 18 randomly selected inmates from all of the living areas, two limited English speaking inmates, and two inmates who had reported having been sexually abused. There were no inmates at the facility who had declared that they were either Gay, Transgender, or Inter-sex, nor were there any handicapped inmates at the facility. Informally, additional inmates and staff were questioned about PREA during the tour of the facility.

The Goodman Unit does not have any Video Surveillance at the facility, accept at the front gate area where individuals entering the facility, must stand in front of a camera and display their identification.

Although there was no video surveillance in other areas of the facility, the security presence was adequate to address any PREA concerns. It was determined through interviews with the investigation staff from the regional office, that the lack of video surveillance does affect their ability to bring sexual abuse incidents to the level of prosecution, due to the fact that the evidence presented is generally one individuals word against another individuals word, and that generally is not sufficient to take a case forward for prosecution.
DESCRIPTION OF FACILITY CHARACTERISTICS:

The Glen Ray Goodman Unit was named after Glen Ray Goodman, a former alcoholic and advocate for Substance Abuse Treatment. The Goodman Unit was initially designated as a Substance Abuse Treatment Facility. However, it was needed as a Transfer Facility, but the name remained the same.

The Goodman Unit is a minimum security, transfer facility. Inmates at Goodman Unit are housed at this facility for a maximum of two years, with an average length of stay of approximately 10 months. The facility is located approximately 3 miles east of highway 96 in Jasper, Texas. The unit sits on 494 acres and houses 612 offenders. The facility is surrounded by two fences, with enhancements of razor wire. In addition to the two fences, there are sections that have a three fence barrier due to areas within the secure compound being fenced in. There is high mast lighting around the perimeter of the facility. The fence does not have any electronic enhancements, but there are continuous patrols to detect any compromises of the perimeter fence. Visitors and staff when entering the facility are required to stand in front of a camera and display their identification before being allowed to enter the facility. Upon entering and leaving the secure perimeter of the facility, staff and visitors are required to show identification before being allowed to enter the secure area of the facility, and again on leaving the secure area of the facility. There are four buildings in the secure area of the facility which house all of the facility operations as well as all of the living areas. Security staff consists of 1 Major, 1 Captain, 5.1 Lieutenants, 14.2 Sergeants, and 95 Correctional Officers. Other staff include; 3 Administration, 27 Support, and 15 Program. The operations of the facility consist of a Maintenance Department, Field and Agriculture Operations, Food and Laundry Services, and Community Service Operations.

The Field Force plants approximately 10 acres of gardens to supplement the Food Service Department in supplies and cost avoidance. The Field Force also maintains all 494 acres. Agricultural Operations provide hay for livestock for the unit as well as multiple other units. The field force has several inmate workers who are supervised by Correctional Staff on horseback.

The Community Service Squads provide grounds upkeep for the Martin Dies State Park and the City of Jasper, to include the County Court House, Historic Properties, Sandy Creek Park, City of Jasper Police Department, and the City Hall.

The facility has programs in Education, which is managed by Windham School District. The facility also hosts volunteer programs, which are managed through the unit's Chaplaincy Department.

The facility also has a Medical Department, which is managed by the University of Texas Medical Branch. It has medical capabilities of basic medical, dental, and psychiatric services, which include pharmacy, laboratory, chronic disease, preventive medicine service, emergency care, and referrals to other facilities as appropriate. The Health Clinic offers skilled nursing care and is available to offenders 8 hours daily. Emergency care is available 24 hours a day.
SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 0
Number of standards met: 42
Number of standards not met: 0
Non-applicable: 1

Acronyms that appear in the context of the standards portion of this report are:

ED=Executive Directive
SPPOM=Safe Prisons PREA Operations Manual
SM=Security Memo
PO=Post Order
AD=Administrative Directive
PD=Policy Directive
CMHC=Corrections Managed Health Care
RCC=Rape Crisis Centers
MOU=Memorandum of Understanding
BP=Board Policy
OIG=Office of Inspector General
SAA=Sexual Assault Awareness
CTSD=Correctional Training and Staff Development
IPM=Intake Procedures Manual
UCPM=Unit Classification Procedures Manual
DFPS=Department of Family Protective Services
EAC=Emergency Action Center
§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)

ED 03.03 Safe Prisons PREA Program, PD 29 Sexual Misconduct with Offenders, Safe Prisons PREA Plan, Organizational Chart, PO 07.150 (rev. 2) Unit Safe Prisons PREA Compliance Manager, SPPOM, all address this 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)

AD 02.46 (rev. 3) Employees of Private Businesses and Governmental entities Contracting with TDCJ, Sample Contract page 14, (c.2), b address this 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)

AD 11.52 (rev. 5), pg 1, Security Staffing, Safe Prisons PREA Plan, SM 01.14 (rev. 2), SOPM 08.01, Turn-Out Roster, PD 22 General Rules of Conduct and Disciplinary Guidelines for employees, support compliance for this 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)

N/A, The Goodman Unit does not house youthful offenders.

§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)

AD 03.22 Offender Searches, PO 07.026 (rev. 5), PO 07.114 (rev. 4), PO 07.132 (rev. 2)
SPPOM 02.05 Cross Gender Searches and Log, Knock and Announce Policy e-mail, PO 07.020 (rev. 5), CMHC G-51.11 Treatment of Offenders with Inter-sex Conditions, Contraband and Shakedown PS Curriculum, and interviews with staff and offenders support compliance with this 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)

AD 04.25 Language Assistance Service to Offenders, AD 06.25 Qualified Interpreter Services, CMHC G 51.1 Offenders with Special Needs, SM 05.50 Qualified Spanish Interpreters, address this 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)

PD 71 Selection System Procedures, PD 73 Selection Criteria for Correctional Officer Applicants, PD 75 Applicants with Pending Criminal Charges or Prior Criminal Convictions, PD
29 Sexual Misconduct with Offenders, Pers-282 Employment Application Supplement, and interview with the Human Resources Manager, support compliance with this standard.

§115.18 – Upgrades to Facilities and Technology

☐ 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)

SOPM 07.02 Deletion, New Installation and Relocation of Video Surveillance Equipment, SM 01.14 Operating and Monitoring the Video Surveillance, address this 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)

AD 16.03 Evidence Handling, CMHC G-57.01 Sexual Assault/Sexual Abuse, SB 1191, SPPOM 05.01 Sexual Abuse Response and Investigation, AD 16.03 Evidence Handling, Rape Advocacy Centers Listing, RCC MOU, RCC Solicitation Letter, SPPOM Offender Victim Representative, address this 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)

AD-02.15 Operations of the Emergency Action Center and Reporting Procedures, AD 16.20 Reporting Incidents, SPPOM 05.01 Sexual Abuse response and investigation, SPPOM 05.05 Offender Protection Investigation, BP 01.07 (rev. 6) Inspector General Policy Statement, PD 29 Sexual Misconduct with Offenders, OIG 04.05 Offender Sexual Assault, address this standard.
§115.31 – Employee Training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Training Curriculums, PD 29 Addendum, Video Script, Safe Prisons/PREA in Texas, Safe Prisons PREA Plan, SPPOM 06.01. AD 12.20 (rev. 6), and PO 97, training and Staff Development, and interviews, with staff, support compliance for this standard.

§115.32 – Volunteer and Contractor Training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

AD 02.46 Employees of Private Businesses and Governmental Entities Contracting with the TDCJ, PD 29 Addendum, Volunteer Services Plan, Volunteer Services Training Script, AD 07.35 Administration of Volunteer Services, VSP Appendix F Acknowledgement of Volunteer Training & Orientation, Explanation Statement of Fact from TDCJ Volunteer Services, and interviews with a volunteer, support compliance for this standard.

§115.33 – Inmate Education

☐ Exceeds Standard (substantially exceeds requirement of standard)

X☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Offender SAA Video Script, SPPOM Safe Prisons PREA Program Postings and Brochures, AD 04.25 (rev. 4) Language Assistance Services, AD 06.25 Qualified Interpreter Services-American Sign Language, CMHC G 51.1 & 51.5, and interviews with inmates, support compliance for this standard.

§115.34 – Specialized Training: Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

CTSD Specialized Investigation Training, AD 16.03 Evidence Handling, OIG LP2029 Interviewing and Investigation Lesson Plan, OIG LP3201, OIG OPM-04.05 Offender Sexual Assault Investigations, and interviews with investigators from the regional office as well as the local investigator, support compliance for this standard.

<table>
<thead>
<tr>
<th>§115.35 – Specialized training: Medical and mental health care</th>
</tr>
</thead>
</table>

- 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)

AD 16.03 Evidence Handling, CMHC c-19.1 Continuing Education and Staff Development, CMHC c-25.1 Orientation Training for Health Services Staff, SB 1191, Medical and Mental Health PREA Training, and interviews with medical staff, support compliance for this standard.

<table>
<thead>
<tr>
<th>§115.41 – Screening for Risk of Victimization and Abusiveness</th>
</tr>
</thead>
</table>

- 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)

CMHC E-35.1 Mental Health Appraisal for Incoming Offenders, SPPOM 03.01 Offender Assessment Screening, CIPM-CL-69 Psychological Screening Interview, EIPM-5.06 Intake Procedure Security Referrals, CMHC A-09.01 Privacy of Care, CMHC H-61.1 Confidentiality and release of Protected Health Information, and interviews with intake staff, support compliance for this standard.

<table>
<thead>
<tr>
<th>§115.42 – Use of Screening Information</th>
</tr>
</thead>
</table>

- 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)

AD 04.17 Offender Housing Assignments, AD 04.18 Offender Jobs Assignment, IPM 4.01 Intake Procedures, SPPOM Offender Assessment Screening, CMHC E-35.1 Mental Health
§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)

Administrative Segregation Plan, SPPOM 05.05 Offender Protection Investigation, I-169A Administrative Segregation Initial Hearing Record, Guidelines for Administrative Segregation, address this 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)

BP 03.91 Uniform Offender Correspondence Rules, TBCJ PREA Brochures, ED 02.10 PREA Complaints and Inquiries, Safe Prisons Plan, SPPOM Attachment AS – Zero Tolerance Posters in both Spanish and English, and interviews with inmates who had made allegations of sexual abuse, support compliance for this 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)

D 1-5 Offender Grievance Operations Manual, AD 03.82 Management of Offender Grievances, BP 03.77 Offender Grievances, OGOM 1.01 Step 1 Grievance Process, address this standard.

§115.53 – Inmate Access to Outside Confidential Support Services

☐ 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)

BP 03.91 Uniform Offender Correspondence Rules, Rape Advocacy Centers, SPPOM 02.02 Offender Victim Representative, RCC MOU, RCC Solicitation Letter, and interviews with inmates determined that they were aware of these services, support compliance for this standard.

§115.54 – Third-Party Reporting

□ 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)

ED 02.03 Ombudsman Program, General Information Guide for families of Offenders, SPPOM 04.02 Receiving Allegations of Sexual Abuse from an Outside Agency, and inmate interviews, support compliance for this standard.

§115.61 – Staff and Agency Reporting Duties

□ Exceeds Standard (substantially exceeds requirement of standard)

X□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

Safe Prisons PREA Plan, SPPOM 05.01 Sexual Abuse Response and Investigation, CMHC 35.2 Mental Health Evaluation, Courage YOP Operations Manual-02.05 Requirements to Conduct DFPS, AD 16.20 Reporting to OIG, PD 29 Sexual Misconduct with Offenders, address this standard.

§115.62 – Agency Protection Duties

□ Exceeds Standard (substantially exceeds requirement of standard)

X□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)
AD 02.15 Operation of the OEAC nd Reporting Procedures for Serious or Unusual Incidents, SPPOM Sexual Abuse Response and Investigation, SPPOM 05.03 Time Frames, address this 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)

SPPOM 04.01 Reporting Allegations of Sexual Abuse to Other Confinement Agencies, SPPOM 04.02 Receiving Allegations of Sexual Abuse from an Outside Agency, SPPOM 05.01 Sexual Abuse Response and Investigation, SPPOM 05.05 Completing the Offender Protection Investigation, address this 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)

AD 16.03 Evidence Handling, SPPOM 05.01 Sexual Abuse, Response and Investigation, and interviews with staff, support compliance for this 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)

Safe Prisons PREA Plan, SPPOM 05.01 Sexual Abuse response and Investigation, address this standard.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

PD 29 Sexual Misconduct with Offenders, PD 22 General Rules of Conduct and Disciplinary Action Guidelines for Employees, PD 35 independent Dismissal Mediation and Dispute Resolution, address this 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)

PD 22 General Rules of Conduct and Disciplinary Actions Guidelines for Employees, SPPOM 05.08 90 DAY Monitoring for Retaliation, SPPOM 02.04 Intervention Practices, address this standard.

§ 115.68 – Post-Allegation Protective Custody

☐ 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)

AD 03.50 Administrative Segregation, AD 04.63 Transient Status Offenders, Administrative Segregation Plan, Administrative Segregation Committee Review Decisions, address this standard.

§ 115.71 – Criminal and Administrative Agency Investigations

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

AD 16.20 Reporting Incidents Crimes to the Office of the Inspector General, Safe Prisons PREA Plan, CTSD Specialized Investigation Training, OIG LP3201 Sexual Assault Investigations, OIG OPM-02.15 Training Procedures, OIG OPM-04.05 Offender Sexual Assault Investigations, OIG OPM-05.10 Property and Evidence Control, AD 02.15 Operation of the EAC & Reporting Procedures for Serious or Unusual Incidents, PD 29 and Addendum (Sexual Misconduct with Offenders), and through interviews with investigative staff, support compliance for this standard.
§115.72 – Evidentiary Standard for Administrative Investigations

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

CTSD Specialized Investigation Training, Safe Prisons Plan, SPPOM Completing the Offender Protection Investigation, and interviews with investigative staff, support compliance for this standard.

§115.73 – Reporting to Inmate

☐ 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)

Safe Prisons Plan, SPPOM 05.05 Attachments J & M, SPPOM 95.11 Attachment F, Staff-on-Offender Sexual Abuse Investigation, SPPOM 05.10 Reporting Sexual Abuse Criminal Case Status to Offenders, and interviews with two inmates who had reported sexual abuse, support compliance for this standard.

§115.76 – Disciplinary sanctions for staff

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

Safe Prisons Plan, SPPOM 05.05 Attachment J Offender Protection Investigation, supports compliance with this standard.

§115.77 – Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement of standard)
X☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐Does Not Meet Standard (requires corrective action)
2014 Volunteer Services Training Video Script, Acknowledgement of Volunteer Training, Orientation, PD 29 (rev. 3) Sexual Misconduct with Offenders, and Volunteer Services Plan, support compliance with this standard.

### §115.78 – Disciplinary sanctions for inmates

<table>
<thead>
<tr>
<th>Disciplinary sanction</th>
<th>Exceeds Standard (substantially exceeds requirement of standard)</th>
<th>Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</th>
<th>Does Not Meet Standard (requires corrective action)</th>
</tr>
</thead>
</table>

GR-106 Disciplinary Rules and Procedures for Offenders, CMCH E35.1 Mental Health Appraisal for Incoming Offenders, Safe Prisons PREA Plan, SOTP 01.01 Overview of the Sex Offender Treatment Program, support compliance in this standard.

### §115.81 – Medical and mental health screenings; history of sexual abuse

<table>
<thead>
<tr>
<th>Medical and mental health screening</th>
<th>Exceeds Standard (substantially exceeds requirement of standard)</th>
<th>Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</th>
<th>Does Not Meet Standard (requires corrective action)</th>
</tr>
</thead>
</table>

CMHC E35.2 Mental Health Evaluation, CMHC G57.1 Sexual Assault/Sexual Abuse, SPPOM 03.01 Attachment E Offender Assessment Screening, CMHC A-09.01 Privacy of Care, CMHC H61.1 Confidentiality and Release of Protected Health Information, CMHC I70.1 Informed Consent, CPOM 02.05 Requirement to Contact Department of Family Protective Services, support compliance for this standard.

### §115.82 – Access to emergency medical and mental health services

<table>
<thead>
<tr>
<th>Access to emergency medical and mental health services</th>
<th>Exceeds Standard (substantially exceeds requirement of standard)</th>
<th>Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</th>
<th>Does Not Meet Standard (requires corrective action)</th>
</tr>
</thead>
</table>

CMHC A 01.01 Access to Care, I-214 Referral to Mental Health Services, CMHC G-57.1 Sexual Assault/Sexual Abuse, and through interviews with inmates, support compliance for this standard.

### §115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers
CMHC G 57.1 Sexual Assault/Sexual Abuse, SPPOM 05.01 Sexual Abuse Response and Investigation, CMHC E 32.1 Receiving, Transfer and Continuity of Care Screening, CMHC E 44.1 Continuity of Care, and through interviews with inmates, support compliance for this standard.

§115.86 – Sexual abuse incident reviews

CMHC G 57.1 Sexual Assault/Sexual Abuse, SPPOM 05.01 Sexual Abuse Response and Investigation, CMHC E 32.1 Receiving, Transfer and Continuity of Care Screening, CMHC E 44.1 Continuity of Care, and through interviews with inmates, support compliance for this standard.

§115.87 – Data Collection

CMHC G 57.1 Sexual Assault/Sexual Abuse, SPPOM 05.01 Sexual Abuse Response and Investigation, CMHC E 32.1 Receiving, Transfer and Continuity of Care Screening, CMHC E 44.1 Continuity of Care, and through interviews with inmates, support compliance for this standard.

§115.88 – Data Review for Corrective Action

CMHC G 57.1 Sexual Assault/Sexual Abuse, SPPOM 05.01 Sexual Abuse Response and Investigation, CMHC E 32.1 Receiving, Transfer and Continuity of Care Screening, CMHC E 44.1 Continuity of Care, and through interviews with inmates, support compliance for this standard.
§§115.89 – Data Storage, Publication, and Destruction

☐ 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)

Records Retention Schedule, addresses compliance for this standard.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

James H. Allen Aug 29, 2014
Auditor Signature Date