

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

**Date of report:** May 2, 2016

<b>Auditor Information</b>			
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<b>Date of facility visit:</b> 4/10-13/2016			
<b>Facility Information</b>			
<b>Facility name:</b> Thomas J. Goree Unit, Texas Department of Criminal Justice (TDCJ)			
<b>Facility physical address:</b> 7405 Highway 75 S., Huntsville, Texas 77344			
<b>Facility mailing address:</b> <i>(if different from above)</i>			
<b>Facility telephone number:</b> 936-295-6331			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Richard Gunnels			
<b>Number of staff assigned to the facility in the last 12 months:</b> 326			
<b>Designed facility capacity:</b> 1321			
<b>Current population of facility:</b> 1219 (04/11/2016)			
<b>Facility security levels/inmate custody levels:</b> Minimum-Medium/G1-G3, Ad Seg, Out Trusty, Transient			
<b>Age range of the population:</b> 18-81 years			
<b>Name of PREA Compliance Manager:</b> Richard Torres		<b>Title:</b> Unit Safe Prisons PREA Manager	
<b>Email address:</b> Richard.Torres@tdcj.texas.gov		<b>Telephone number:</b> 936-295-6331	
<b>Agency Information</b>			
<b>Name of agency:</b> Texas Department of Criminal Justice			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> State of Texas			
<b>Physical address:</b> 861-B I-45 N., Huntsville, TX 77320			
<b>Mailing address:</b> <i>(if different from above)</i> PO Box 99, Huntsville, TX 77342			
<b>Telephone number:</b> 936-295-6371			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Brad Livingston		<b>Title:</b> Executive Director	
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<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> William Stephens		<b>Title:</b> Director, Correctional Institutions Division	
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## AUDIT FINDINGS

### NARRATIVE

The Prison Rape Elimination Act (PREA) Audit for the Thomas J. Goree Unit began with the notification/assignment and scheduling by the American Correctional Association (ACA) of PREA auditor, James Curington, and with a site visit to the facility in Huntsville, Texas. This notification, made in late January by the ACA, included information that this was to be part of a back-to-back audit of TDCJ facilities, Goree Unit, beginning with a pre-meeting April 10, 2016 and closing with the Huntsville (Walls) Unit April 15, 2016. Also taking place during this period of time was a back-to-back ACA re-accreditation audit, Huntsville Unit beginning with a pre-meeting April 10, 2016, and an exit/closeout with the Goree Unit April 15, 2016.

The audit process began with necessary and appropriate notifications and postings, exchange of information, disclosure forms, and contacts. James Curington, the PREA auditor, submitted a written daily agenda prior to the audit visit.

The audit agenda for the two facilities was sent to the TDCJ Office of Administrative Review and Risk Management and the Wardens. The Goree Unit agenda was as follows:

Sunday, April 10

Evening dinner/introductions/meet and greet facility staff and PREA and ACA auditors  
Review PREA Audit Instrument and Pre-Audit Questionnaire. Open discussion  
Meet with ACA Chairperson and team – ACA PREA Audit discussion (TBA)  
(Huntsville and Goree having an ACA audit this week as Goree and Huntsville is having a PREA audit)

Monday, April 11 – PREA Audit Goree Unit

7:30 AM, Drive from the hotel to the Goree facility. Drive the perimeter and grounds of the Goree Unit.  
Entrance (8:00 AM) – Goree Unit – Meet the Warden and key staff and/or Department Heads – Discuss Audit Instrument from the PREA Resource Center.  
Review audit schedule – Schedule interviews with staff and inmates. Facility staff input. Investigator – Victim Support – Mental Health – Inmate mentors/tutors  
Tour facility [lists of where, who (their title), and when (time), suggestions – discussion] Note: "Instructions for PREA Audit Tour"  
Review PREA Standards/Justifications  
Review demographics of the facility – Review schematics  
Interviews with staff and inmates. Note: "Interview Protocols". i) Agency Head, ii) Warden, iii) PREA Compliance Manager/Coordinator, iv) Specialized Staff, v) Random Staff, vi) Inmates  
Stay late for evening review.

Tuesday, April 12 – PREA Audit Goree Unit

7:30 AM, Leave for Goree Unit  
Visit and revisit institutional areas. Review specialty areas – Medical/Mental Health, EMS/Forensic EM, and Victim Support Services (VCS)  
Review PREA Standards for compliance/information  
Review Safety, Security, Investigations  
Interview with staff and inmates. (Note: "Interview Protocols"). Make sure interviews include all staff "shifts"  
View offender orientation/admission

Wednesday morning, April 13 – PREA Audit Goree Unit

Interview Warden, PREA Compliance Manager  
Follow-up on PREA Standards compliance  
Short tour with Warden, Compliance Manager, Agency Coordinator  
Review Auditor's Summary procedures (interim report/final report) with key staff  
Depart Goree Unit

Agenda for the site visit is flexible and tentative. The goal is a thorough, comprehensive, professional and expert PREA audit review in conjunction with the facility staff and inmates and the Agency PREA Coordinator.

The TDCJ, Office of Administrative Review and Risk Management submitted to the PREA auditor a flash/thumb drive containing PREA Pre-Audit Questionnaires for the Goree and Huntsville Units, a Master Folder File addressing all 43 PREA standards and Supporting Documents for the Goree and Huntsville Units. Special thanks is extended to TDCJ, and the facilities for this compilation of Unit and Agency information to assist the auditor in assessing PREA compliance for these two facilities. This material was thoroughly reviewed prior to the on-site visit. Special attention was paid to the Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual (SPPOM), these are two extensive management documents covering all TDCJ prisons. Additionally, the policies of the Texas Board of Criminal Justice (TBCJ Policies and Procedures), the Executive Directives/Board Policy, the policies of the Texas Department of Criminal Justice (TDCJ Policies and Procedures), the Administrative Directives, the policies of the Correctional Institutional Division (CID Plans, Policy, and Procedures), the policies of the University of Texas Medical Branch (UTMB) assigned to the TDCJ facilities for Correctional Managed Healthcare (CMHC Policies, Procedures and Protocols), and the policies and laws from Texas Government Codes, all were sent to, and reviewed by the auditor.

The PREA Audit Instrument, Adult Prisons and Jails was supplied by the National PREA Resource Center (PRC) through its website, and was/is used to conduct the Goree Unit PREA audit. The Audit Instrument and its seven sections A-G is detailed as follows: A) the Pre-Audit Questionnaire, B) the Auditor's Compliance Tool, C) the Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor's Summary, F) the Process Map, and G) the Checklist of Documentation. This instrument is the basis for the auditor's assessment process and is also used by the facility to help prepare for the audit.

Thus began the audit process and the methodology of assessment, (through the daily on-site agenda; the Audit Instrument; the personal contacts; the systematic review of materials, documents, policies, procedures, the information acquired by the auditor; and the audit tour;) to and including a summary review and the PREA Auditor's Summary Report.

The pre-meeting held Sunday, April 10, 2016 was a dinner and a meet and greet with key staff (including Wardens and the Institutional PREA Managers) from the TDCJ Goree and Huntsville Units, the ACA-accreditation team for both units, and the PREA auditor for both units.

Early on Monday morning, April 11, the PREA auditor began the on-site visit and tour of the Goree Unit with a drive around the main facility, the camp, the grounds and the farms. An entrance interview was held with the Warden and his key staff describing the on-site visit, and the distribution of the agenda.

The agenda was followed for Monday, Tuesday and Wednesday, touring and retouring all areas of the facility; interviewing staff and inmates; observing, discussing, and understanding the operations; and reviewing the 43 PREA standards.

The total number of formal interviews with inmates was 29, additionally many informal interviews were also conducted with the inmate population. Inmates from every housing area were interviewed. The total number of formal interviews with random staff was 14. There were 16 formal interviews with specialized staff, and numerous informal interviews were held with staff throughout the facility.

Wednesday, April 13, included a short on-site tour and visit. The auditor met with key staff and the Warden to indicate that a report would be completed within 30 days. It was the auditor's opinion, at this time, that there were no non-compliant standards nor violations noted and that with the summary review, the report would be a final summary report. Please see in the Summary of Findings following this Narrative and the Description of Facility Characteristics, all applicable standards comply in all material ways with the standard or exceeded the requirement of the standard, for this initial review period. There were no standards that did not meet the standard requirement.

## DESCRIPTION OF FACILITY CHARACTERISTICS

The Texas Department of Criminal Justice (TDCJ) manages offenders in state prisons, state jails and private correctional facilities that contract with the TDCJ. The Agency also provides funding of certain oversight of community supervision (previously known as adult probation) and is responsible for the supervision of offenders released from prison on parole or mandatory supervision. The above taken from the TDCJ website

The Goree Unit is a large medium-minimum security facility of the TDCJ, consisting of approximately 717 acres located at 7405 Highway 75 S., Huntsville, TX 77344, 4 miles south of downtown Huntsville in Walker County. The facility is named after Thomas J. Goree (penitentiary superintendent 1878-88, and penitentiary board 1883-84). The facility was actually established as a Unit in 1909 for the consolidation of women prisoners until the relocation of women prisoners to Gatesville, Texas in the late 1970s and early 1980's. Taken from the TDCJ website.

The facility itself is described by the auditor as having three parts, the main unit, the camp, and the outside farms and grounds. There is a "disjointed" very large single main interconnected building/unit (building that has been expanded and added onto many times but all connected under one roof) with a few supportive small buildings such as the back gate office, contact visiting, Dobbs building, and the craft shop. The main unit has a maximum capacity of 1000 beds. The main unit has a telephone style corridor from which the housing units, dining halls, operational offices, program offices, medical, maintenance, laundry, and etc. extend, and are interconnected. In addition the building has two and three story levels, of cellblocks, dorms, and offices. Upon entry to this building through the front security pedestrian gate, there is a Main Lobby, the Warden's office complex, a regular visitation area, and the central control station. This main unit is within a perimeter road, 8/10 mile. Also within the perimeter road surrounding the main unit, is a single 12 foot chain-link fence surrounds this main unit compound. Strategically placed are four armed towers (pickets), posted 24/7. (Please see the schematic/layout that follows.) An adjacent camp consists of small individual buildings; three dorm buildings with 321 beds (maximum capacity), an administration building, a food service building, a recreation building and a turnout/shift briefing building. The camp as mentioned, is an unfenced, all-male, minimum-security facility with 321 beds suppling inmates to the farms for the TDCJ statewide horse breeding program, agricultural programs, central TDCJ administrative and warehouse inmate labor/worker support services, community projects, and institutional support services.

The main institutional operations of the Goree Unit include its' A) housing of minimum-medium state prisoners, B) statewide TDCJ horse breeding program, C) Sex Offender Treatment Program (SOTP), and D) transient housing center for male inmates (male inmates for dynamic risk assessment, and homeland security, immigration and customs) and female inmates (female inmates going to the UTMB Galveston Hospital). On rare occasions transient housing can be used for special inmate transient issues. On the first day of the PREA audit there were 931 inmates at the main unit, with 51 outgoing and 16 incoming males in transit status; and 26 outgoing and 37 incoming females in transit status. These transient inmates are classified as unassigned to the facility. The trustee camp count, the first day of the audit was 288 male inmates (there are no female inmates housed at the camp).

The Windham school district operates the educational programs, including Literacy, Adult Basic Education (ABE), and the General Equivalency Diploma (GED).

Work programs for the facility includes the following: at the Main Unit; housekeeping, janitorial, orderly, kitchen/food service, laundry/tailoring, landscape, grounds, utility, insight, and maintenance; and at the Trustee Camp; livestock, utility, garden squad, janitor, laundry, kitchen, warehouse, motor pool, grounds-keeping, and maintenance.

The Sex Offender Rehabilitation Program is an 18 month program with a nine month high-intensity program treating approximately 150 male inmates.

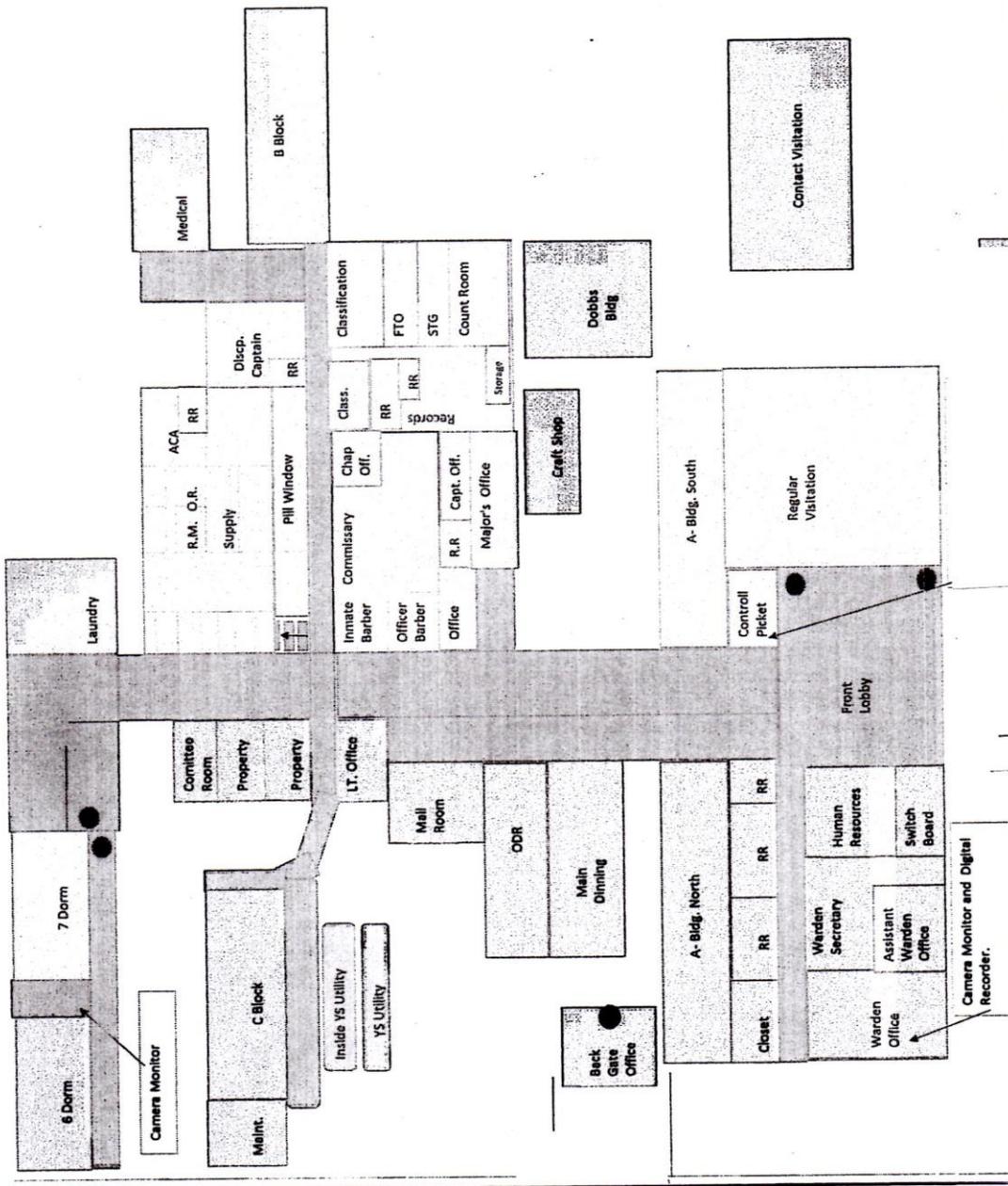
Specialty programs also include a faith-based dormitory with programs, reentry planning, and PREA peer education.

Healthcare capabilities are described as an ambulatory, medical, dental and mental health services. CPAP (Continuous Positive Airway Pressure) accommodating housing is also available. All healthcare is managed by the University of Texas Medical Branch.

Mission statement of the TDCJ and the Goree Unit:

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

CAMP  
MINIMUM



FRONT

GOREE UNIT

**Facility demographics:**

Designated Facility Capacity: Main Unit 1000, Trustee Camp 321, Total 1321

Actual Capacity: 931 Main Unit, 288 Trustee Camp, April 11, 2016

Age Range of Population: 18-81 years

Gender: Male (Special Note: some unassigned incoming and outgoing transient female inmates are temporarily housed appropriately and securely at the Unit. On 04/11/2016, 20 females were on the Unit.)

Security: Minimum-Medium; Custody Level, G1-G3, Administrative Segregation, Outside Trustee, Transient

Total Employees: 315 total, 227 security, 74 non-security, 14 other

The Thomas J. Goree Unit is an American Correctional Association accredited facility and has been recommended for reaccreditation April 15, 2016. The PREA auditor was at the closeout for the accreditation audit for this recommendation.

**SUMMARY OF AUDIT FINDINGS**

The Thomas J. Goree Unit was assessed as in compliance with the PREA standards and this is a final report. Not applicable standards were as follows: 115.12 Contracts, 115.14 Youthful Offenders, and 115.66 Preservation of Ability to Protect.

Number of standards exceeded: 3

Number of standards met: 37

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)

The Thomas J. Goree Unit (Goree Unit) was audited and reviewed for PREA compliance April 10-13, 2016. The Texas Department of Criminal Justice (TDCJ) has a Safe Prisons Policy which was developed to prevent, detect and respond to sexual abuse and sexual harassment. The policy includes definitions, sanctions, strategies and "zero tolerance". The policy was last revised in August 2014, and consists of approximately 40 pages. The Safe Prisons/PREA Plan specifically refers to this standard on pages 1 through 16. The forward to this Safe Prisons/PREA Plan states "the Texas Department of Criminal Justice has zero tolerance for all forms of sexual abuse and sexual harassment of offenders.... The TDCJ shall be vigilant in establishing a safe environment for staff and offenders at all secure correctional facilities and take immediate action to address the protective needs of offenders who have been victimized.... The TDCJ Safe Prisons/PREA Plan shall be applicable to all individuals, including visitors and volunteers, employed by, under contract with, or supervised by the TDCJ, including professional staff and any person who is involved directly or indirectly with the care and custody of offenders."

Moreover, a lengthy Safe Prisons/PREA Operations Manual (SPPOM) addresses 1) administration, 2) intervention, 3) assessment and screening, 4) reporting/receiving allegations, 5) investigation, 6) training, 7) grids, codes, files and transfers, 8) reporting and 9) 22 attachments (checklists, reports, information templates, and etc.) to assist operationally.

The Agency has designated Mr. William Stephens, Director, Correctional Institutions Division, as the Agency-wide PREA Coordinator. His scripted interview strongly supported safe prisons and indicated that he has sufficient time to develop, implement and oversee the Agency's efforts to comply with PREA standards. Agency organizational charts were reviewed.

The Goree Unit has a PREA Compliance Manager, Mr. Richard Torres. Mr. Torres has sufficient time to coordinate the Unit's efforts to comply with PREA, which he described in his scripted interview. Mr. Torres has direct access to the Warden reference PREA. Institutional organizational charts were reviewed.

The auditor was particularly impressed with the staff's knowledge of the Zero Tolerance Policy, the turnout/shift change training, the annual training, the Compliance Manager's leadership/communication, and the staff pocket handout addressing PREA and zero tolerance.

Based on the above information, staff knowledge, inmate knowledge, interviews, continuous training, and the posted information throughout the Goree Unit (and not excluding the fact that the Goree Unit is located in Huntsville, Texas, the headquarters of the TDCJ) the auditor assesses this standard as exceeds.

### **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)
  
- Not applicable

The Goree Unit does not contract with other entities for the confinement of inmates.

### **Standard 115.13 Supervision and monitoring**

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

The Goree Unit operates with adequate staffing as outlined in the 11 steps of PREA standard 115.13:

- 1) generally accepted detention and correctional practices (agency annual review)
- 2) any judicial findings of inadequacy (none)
- 3) the findings of inadequacy from federal investigative agencies (none)
- 4) any findings of inadequacy from internal or external oversight bodies (none)
- 5) all components of the facility's physical plant (continuous review)
- 6) the composition of the inmate population (continuous review)
- 7) number and placement of supervisory staff (continuous review)
- 8) institution programs occurring on a particular shift (continuous review)
- 9) applicable state or local laws, regulations, or standards (continuous review)
- 10) the prevalence of substantiated and unsubstantiated incidents of sexual abuse (incident review team)
- 11) any other relevant factors (continuous review).

The Warden and his staff, including the Human Resource Department, has assured adequate staffing according to the needs and priorities of the Unit and the Agency. The Warden and his key staff continuously and routinely review the staffing plan, recruitment policies, and institutional needs to assure the safety of staff and inmates. There are approximately 50 vacancies at the facility but recent efforts have increased the number of trainees and new hires, thus ensuring adequate supervision and monitoring. The Goree Unit has not and does not operate below its established minimum/mandatory staffing complement. Staffing is reviewed daily by key supervisors, including the Warden and Major.

Intermediate level and higher-level staff conduct unannounced rounds, which helps ensure the appropriate monitoring and supervision required in each housing area. Security Post Orders, and the Security Operations Manual address supervision duties and responsibilities, including the unannounced rounds, the completion of incident reviews, daily logs, reports, counts, and the safety and security and daily operational procedures.

The Goree Unit is a minimum/medium facility having 10 monitoring video cameras primarily reviewing perimeter security, the gate breaches (ingress/egress) in the perimeter fencing, and the control areas. Cameras are monitored in central control, security, and the Warden's office.

Based on random staff interviews and specialty staff interviews, review of logs, area visit documentation, and observations made during the tour, the auditor assesses compliance.

### **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)
- Not Applicable

There are no youthful offenders assigned to the Goree Unit.

The auditor notes that a female youthful offender has been transported and held in transient status at the Unit, but a special provision and a housing wing closure has been/was made to ensure no sight or sound contact is/was made with the transient

youthful inmate. The Warden and his key staff are personally involved in any transient youthful inmate under 17 or any transient death row inmate that passes through the facility assuring safety, security, and PREA compliance.

Because of the rarity of the situation, mentioned above, and the fact that no youthful inmates nor death row inmates are assigned to the Goree Unit, the auditor assesses not-applicable.

### **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)

The Safe Prisons/PREA Operational Manual, SPPOM 02.05, and Administrative Directive, AD 03.22, both address cross gender viewing and searches. Staff of the same gender shall not conduct strip searches and visual body cavity searches, except in exigent circumstances.

In the past 12 months, there were six cross gender strip searches of male inmates. These six searches have been documented and were reviewed by the auditor. These searches were done in error. The appropriate corrections have been taken by the Agency and the staff to assure PREA compliance. The auditor's observation of searches and the interviews held with staff and inmates support compliance of this standard.

Staff is well-trained on searches of male inmates, female inmates, transgender and intersex inmates. Training curriculum including pre-training, titled Contraband and Shakedown, was reviewed by the auditor. 100% of the staff have been trained.

It is noted that there is a female housing wing for transient inmates at the Goree Unit. The auditor interviewed female inmates and staff assigned to the wing. Strip searches, visual body cavity searches, and medical searches are appropriately handled as outlined in the Safe Prisons Plan and Operational Procedures. The plan and procedures for the Goree Unit are PREA compliant.

Procedures require that staff of the opposite gender announce their presence when entering inmate housing. This was observed by the auditor in both male and female housing in the transient area as well as the assigned Unit and the Trustee Camp which houses only male inmates. Staff announce themselves in a loud and clear voice affording inmates the opportunity to toilet, shower, and change clothes, without being viewed by a staff of the opposite gender.

Policy AD 03.22 prohibits the facility from examining transgender or intersex for the sole purpose of determining the inmates' genital status.

Based on staff and inmate interviews, review of the policy and observation of the daily operations of the Unit, this standard was assessed as being compliant with PREA.

### **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)

The TDCJ, through its correctional mental health policies and through Administrative Directives AD 04.25 and AD 06.25, addresses interpreter services, American Sign Language services, and offenders with special needs. The agency has

established procedures to provide inmates, with limited English proficiency, an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent and respond to sexual abuse and sexual harassment.

Agency policy prohibits the use of inmate interpreters or other types of inmate assistants except in limited circumstances where there may be an extended delay in obtaining an effective interpreter for emergency situations.

In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used, is zero (0).

Based on the policies above and interviews with health care staff and inmates, this standard is found in compliance.

### **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)

Hiring and Promotion Decisions standard 115.17 contains eight subsections from a-h, outlining the importance of thorough background checks, and vetting of staff and new employees, contractors, and volunteers who have contact with inmates. The auditor spent time with the PREA Compliance Manager, the Human Resource Manager, and key staff reviewing personnel policy, procedures, employment applications, supplemental applications, background checks, and PREA concerns and expectations established by PREA law.

The TDCJ policy, and the Texas Government Code prohibits hiring and promoting anyone who has contact with inmates who have engaged in sexual abuse in prison or was convicted of engaging in or attempting to engage in sexual activity by force in the community or who has civilly or administratively been adjudicated to have engaged in sexual activity by force. The Agency and the Unit also requires consideration of any incidents of sexual harassment in determining whether to hire or promote someone.

Background checks are conducted on all newly hired staff or serious applicants. In the past 12 months, there have been 67 persons hired who may have contact with inmates who have had criminal background record checks. Record checks are completed by the Human Resources Headquarters in Huntsville and the notification of completed background checks is sent to the facility with clearance to hire. These communications were reviewed by the auditor.

Based on the auditor's review of the communications with the Human Resources Department and interviews with the Unit Warden and Human Resource Manager, and with review of policy and procedures of the TDCJ, this standard was assessed as compliant.

### **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)

According to the Pre-Audit Questionnaire standard 115.18 subsection a-1 states that the facility has not made any substantial expansion or modification of existing facilities since August 20, 2012. (Note, this is an initial PREA audit)

The Pre-Audit Questionnaire also indicates that this standard subsection, a-2, has made some updated or installed some video

monitoring to their present system. The auditor reviewed the video monitoring system and used the entrance gate modifications installed to monitor ingress and egress to the facility during his many visits. In the interview with the Warden and key staff, the auditor discussed expanding the technology at the Unit and notes that there are future plans for continued improvement. However, it is also noted that this is a minimum, medium unit and the priority is not as high as for some of the more maximum security units. This does not detract from the appropriate supervision and monitoring afforded by the staff at the Goree Unit. The fine line of maintaining a tight budget and yet improving and upgrading the facilities and technology at a correctional institution will always challenge the most talented staff at any facility.

This standard is found in compliance based on the auditor's review of safety and security, technology, and the interviews of key staff.

### **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)

TDCJ is responsible for administrative and criminal sexual abuse investigations. Safe Prisons/PREA Operations Manual, SPPOM 05.01, assures the investigators follow a uniform evidence protocol through the use of the Sexual Abuse Checklist Operating Memorandum.

This standard begins with the fact that all allegations are investigated. This Safe Prisons/PREA Plan, outlines that investigations of sexual abuse and sexual harassment shall be conducted promptly, early, and objectively including third-party and anonymous reports. Moreover, the investigations will be conducted by investigators who have received special training in sexual abuse investigations.

Importantly, investigations of sexual abuse allegations include notification of the Emergency Action Center (EAC) and, as outlined in policy, notification to the Office of the Inspector General (OIG) as appropriate and necessary. It is noted that a staff member with the rank of major or above shall review, monitor and track all Offender Protection Investigations (OPIs). OPIs are submitted to the Unit Chief of Classification for committee review in accordance with the Safe Prisons/PREA Operational Manual, the TDCJ Classification Plan, and the TDCJ Unit Classification Procedures Manual.

The protocol for investigations was adapted from "A National Protocol for Sexual Assault Medical Forensic Examinations Adult/Adolescents". Forensic medical exams are not conducted by TDCJ staff nor the UTMB staff.

As directed by Corrections Managed Health Care, University of Texas Medical Branch (UTMB) policy, G 57.1, the facility offers all inmates who experience sexual abuse, access to forensic medical examinations without financial cost. There have been zero (0) number of forensic medical exams during the past 12 months.

The facility has attempted to obtain a community victim advocate, from a rape crisis center however, at this time it has been unsuccessful. When a victim advocate, from a rape crisis center is not available, the facility provides a trained Offender Victim Representative (OVR) to assist. The Warden has appointed OVRs.

Based on the above policies, interviews with staff and inmates, and interviews with OIG investigators, this standard is assessed as compliant.

### **Standard 115.22 Policies to ensure referrals of allegations for investigations**

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

The Agency and the Unit ensure that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment.

During the past 12 months there have been five (5) allegations of sexual abuse and sexual harassment that were received and investigated at the Goree Unit. Three (3) resulted in an administrative investigation and two (2) of these were referred for criminal investigation.

The notification of the Emergency Action Center and the reporting procedures to the Office of Inspector General, as outlined in policy, were followed and the appropriate steps were taken. The auditor reviewed the investigations with the Warden, key staff and the PREA Compliance Manager.

Interviews with investigative staff, random staff, and inmates indicate knowledge and familiarity with policies and procedures. The pocket information cards distributed to staff and the training received by staff, assist in the thoroughness and completeness of offender protection investigations and the tracking of such investigations.

The Office of the Inspector General policy 04.05 and the Texas Board of Criminal Justice policy BP-01.07 dictates requirements and referrals for investigation to those with legal authority to conduct criminal investigations. Criminal investigations are documented.

The auditor confirms compliance with this standard based on the review of these investigations and documents, as well as the interviews with specialized staff.

### **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)

Attendance at shift turnouts (i.e. shift briefings), which are 45 minutes of communications, training, information, and assignments; staff interviews; training curriculum; and observation of operations at the Goree Unit impressed the auditor and influenced his decision to rate this standard as substantially exceeding the requirements for compliance.

Staff are knowledgeable about the Zero Tolerance Policy for sexual abuse. They are knowledgeable on how to perform their responsibilities in detection of sexual abuse, reporting of sexual abuse, and responding to sexual abuse. Staff have received pocket guidelines outlining the TDCJ's Mission Statement, the Officers Code of Ethics, PREA information, first responder duties, and supplemental information concerning care and control of the inmate population. It was noted by the auditor, how professional and serious each staff member was to their job/post assignment. Without exception, all random staff formally interviewed about the following (and those informally interviewed and asked about the following or partially asked about the following) were knowledgeable and understood the issues:

- 1) Agency Zero-Tolerance Policy
- 2) how to fulfill their responsibilities regarding PREA
- 3) the right of inmates to be free from sexual abuse and sexual harassment

- 4) the right of inmates and employees to be free from retaliation for reporting
- 5) the dynamics of sexual abuse and sexual harassment, and confinement
- 6) the common reactions of sexual abuse and sexual harassment victims
- 7) how to detect and respond to signs of threatened and actual sexual abuse
- 8) how to avoid inappropriate relationships with inmates
- 9) how to communicate effectively and professionally with inmates including LGBTI and gender nonconforming
- 10) how to comply with mandatory reporting laws.

Again, responses to these questions by staff at the Unit influenced the auditor to assess an "exceeds".

Training is tailored to the gender of the inmates at the facility and the auditor notes that there is specialized training for the transient women who are not assigned to the facility that may be held and transported to the hospital in Galveston, Texas. 320 of the 321 staff have been PREA trained (only in very unusual circumstances, has training not occurred). All training has been documented and maintained.

Based on the Administrative Policy AD-12.20, training curriculum, and the interviews with staff, this standard is assessed as "exceeds standard".

### **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)

All volunteers and contractors who have contact with inmates have been trained in their responsibilities under the TDCJ. Policies include procedures regarding sexual abuse/sexual harassment prevention, detection, and response.

The emphasis on volunteer training can be recognized through the efforts made by the TDCJ in establishing a Volunteer Service Plan, a handbook for volunteers which is available on the public website, and a special training video to help educate the volunteers who assist the Texas Department of Criminal Justice. The auditor reviewed the volunteer service plan, a handbook for volunteers, the video script for volunteers, and the Safe Prisons/PREA Plan in order to help assess the Institution's compliance with this standard.

It should be noted that TDCJ has over 10,000 volunteers in the state of Texas who are certified by the TDCJ and have had the appropriate background checks, the required Institutional/Volunteer Training, the Code of Conduct Training, and the PREA training. The training is documented, and acknowledgment forms are signed, recorded and preserved.

Volunteer initiatives at the Goree Unit included substance abuse education, religious/faith-based studies and activities.

Based on the auditor's interviews with staff, inmates, interns, volunteers and contractors as well as review of policies, and the above mentioned materials, this standard is found compliant.

### **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)

Inmates, at the time of their assignment/intake, receive educational materials and information about the Department's "Zero-Tolerance" Policy and how to report incidents or suspicions of sexual abuse or sexual harassment.

903 inmates were admitted and assigned to the Goree Unit in the past 12 months and all 903 inmates received comprehensive education on their rights to be free from sexual abuse/harassment and retaliation for reporting such incidents. It should be noted that the Goree Unit is also a transient unit for some female and male inmates who therefore may be overnight or short stays. This standard addresses a 30 day timeframe for education during intake at a facility thus the auditor understands the inmate education issue for transient inmates. Conversations with inmates and staff revealed that these transient inmates have been educated during the reception process or at their assigned institutions. Moreover, the staff at this facility is professional, conscientious, PREA trained and, in the auditors opinion, clearly concerned about the custody, care and control of all inmates assigned to the facility.

Peer education is the cornerstone to effective communication and training of the inmates' in PREA understanding, PREA rights, and PREA procedures. Interviews with peer educators (inmates) and staff supervisors, confirmed a well-organized and effective process for inmate PREA education.

Inmate PREA education is available in different formats to accommodate all inmates. The education of inmates takes into account the physical/mental health care disabilities and limited English proficiency. Spanish-language handbooks, posters and information pamphlets were noted.

Inmate education is documented. Individual treatment plans also document PREA education.

Based on the auditors review of unit classification procedure, administrative directives, correctional medical healthcare policies, zero-tolerance postings, and the inmate handbooks as well as interviews with the inmates themselves confirms compliance for this standard.

#### **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)

The Agency's training policy along with training curriculum and personnel policy, requires investigators to be trained in conducting sexual abuse investigations in confinement settings. This training is outlined in a 60 page document, Correctional Training, Specialized Investigations.

The Office of the Inspector General also conducts specialized training as outlined in the OIG Operational Policy Manual, OPM-02.15. The number of investigators who have received inspector training are 134 investigators of the Office of the Inspector General and 24 Unit trained investigators [two (2) Unit investigators housed at the Huntsville Unit assist and have responsibility for the Goree Unit]. These numbers are documented by the Pre-Audit Questionnaire.

The documentation of the investigative training is maintained in the personnel files.

The auditor conducted specialized staff interviews (OIG administrative and criminal investigative staff) and reviewed TBCJ Board policy, Correctional Institutions Division policy, investigation training/policy, Administrative Directive policy AD-16.03, OIG Policy-02.15, and personnel policies and files to assess compliance for this standard.

### **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)

The University of Texas Medical Branch, UTMB, coordinates healthcare at the Goree Unit. Correctional Managed Healthcare policies, CMHC 25.1 Orientation, CMHC C 19.1 Continuing Education and CMHC G 57.1 Sexual Assault and Sexual Abuse, all direct specialized training for medical and mental health care staff. Moreover, medical and mental health care staff are tested on PREA medical and mental health training. The auditor assesses this standard as exceeds, not only based on the thoroughness and completeness of UTMB's training, but also on the fact that they go to great lengths to administer and record the testing of their healthcare staff.

University of Texas Medical Branch staff/practitioners who regularly work at the Goree Unit have received specialized training. It should also be noted that practitioners do not conduct forensic medical examinations. Such examinations are done by SAFE, SANE staff at the local hospital, Huntsville Memorial Hospital.

100% of all medical and mental health care practitioners who regularly work at this Unit have received the training required by the Agency and the UTMB policy. Training is documented and maintained.

Specialized staff were interviewed at this facility, documents were reviewed, inmates were interviewed, and this standard is assessed as "exceeds".

### **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)

The Safe Prisons/PREA Operational Manual (SPPOM) and the Safe Prisons/PREA Plan, addresses and outlines the screening processes for the risk of victimization and abusiveness. Included in the manual is the Offender Assessment Screening Form which addresses the risk of sexual victimization or the risk of sexual abuse of other inmates. This form is completed within 72 hours of intake. The intake process was reviewed by the auditor.

Inmates are assessed during the intake screening at the time of reception into the TDCJ and upon being transferred to another facility. Their assessments include screening for the risk of being sexually abused by other inmates or of being sexually abusive towards other inmates. The Goree Unit assesses each inmate assigned and received at the facility. Note, again, at this facility transient inmates are received but they are not taken through the intake process (generally they are held for a short time overnight or a few hours to be transported to medical/long-term care facilities).

The intake process includes an objective assessment tool SPPOM 03.01, attachment E form and its use as directed by the TDCJ Safe Prisons/PREA Operational Manual, section Assessment Screening. This is done at the original intake facility and at the assignment to another facility. It includes the 10 following items:

- 1) whether the inmate has a mental, physical, or developmental disability;
- 2) the age of the inmate;
- 3) physical build of the inmate;
- 4) whether the inmate has previously been incarcerated;
- 5) whether the inmate's criminal history is exclusively nonviolent;

- 6) whether the inmate has prior convictions for sex offenses against an adult or child;
- 7) whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- 8) whether the inmate has previously experienced sexual victimization;
- 9) the inmates own perception of vulnerability; and
- 10) whether the inmate is detained solely for civil immigration purposes (none at this facility).

TDCJ does not solely detain inmates for civil immigration purposes.

The TDCJ Offender Intake Processing Psychological Screening Interview is conducted, as appropriate, to individual inmates. This four-page form includes a history and mental health review and is done within 30 days with assessment levels being reassessed as warranted by the practitioner.

Inmates, by policy limits, are not to be disciplined for refusing to answer questions during assessments. Dissemination of inmate PREA information, within the facility, is handled on a confidential/limited basis.

870 inmates, whose length of stay was for more than 72 hours, entered the facility through intake and assignment within the past 12 months and were screened for the risk of sexual victimization or the risk of sexually abusing other inmates. The screening took place within 72 hours. Information supplied by the PREA Pre-Audit Questionnaire.

This standard is assessed as compliant based on review of the above process, review of policies/procedures, and interviews with intake and health care staff, random staff and inmates.

#### **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)

The Unit Classification Committee (UCC); following the directions of Administrative Directive, AD 4.17 Offender Housing Assignment, Administrative Directive AD 04.18 Offender Job Assignment, Correctional Managed Health Care policy CMHC E-35.1, Mental Health Appraisal for Incoming Offenders, CMHC G-51.11, Treatment of Inmates with Intersex Conditions or Gender Dysphoria, and the Safe Prisons Plan Operational Manual, Assessment Screening; make housing, bed, work, education, and program assignments for inmates at the Goree Unit. Special attention is paid to the safety and security of those inmates that are at high risk of being sexually victimized and attention is also extended to those inmates who may be sexually abusive. Clearly, based on the policies and procedures, each risk assessment screening is made on an individual basis and is in the interest of safety and security for inmates and staff.

The above policies, the intake procedures, and the Unit Classification Procedures Manual were reviewed by the auditor. The document clearly outlines use of information and risk screening on an individual basis for safety and security, and such information to be shared on a limited basis. Interviews with intake and mental health staff, supported by interviews with inmates, as well as observation of the assessment process, and review of the documentation supports the use of screening information as being on a "need to know" basis. Healthcare staff is especially concerned with privacy and confidentiality issues and their compliance with health care regulations and disclosure laws.

There are no transgender or intersex inmates at the facility. Interviews indicated if such inmates were assigned, housing and program assignments would be made on a case to case basis.

Based on the information, and interviews mentioned above, the auditor assesses compliance for this standard.

### **Standard 115.43 Protective custody**

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

The TDCJ has a policy, Safe Prisons/PREA Plan in conjunction with its Safe Prisons/PREA Operations Manual (SPPOM)-05.05 and an Administrative Segregation Plan, prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.

There have been zero (0) number of inmates at risk of sexual victimization, who were held in involuntary segregated housing in the past 12 months at the Goree Unit.

It is also noted that the Goree Unit has limited restricted housing space and thus uses, very judiciously, its confinement cells to hold or segregate inmates.

The auditor's review of policies and procedures, the examination of investigations and documents, and interviews with the Warden and the PREA Manager confirms compliance with PREA.

### **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)

The Safe Prisons/PREA Plan has established procedures for allowing for multiple internal ways for inmates to report privately to agency officials about sexual abuse or sexual harassment, retaliation, or staff neglect/violation of responsibilities regarding PREA. The Safe Prisons/PREA Operations Manual (SPPOM) and attachments also outlines ways for inmates to report sexual abuse and sexual harassment.

The institutional inmate handbook and information, distributed during intake, outlines ways for inmates to report sexual harassment or sexual abuse.

The PEER inmate mentor programs, conducted by inmates under the supervision of staff, addresses reporting sexual abuse and sexual harassment during inmate intake, and the initial institutional PREA inmate education process. The PEER mentoring process includes the PREA video shown during the intake process, which further describes and outlines ways for inmates to report sexual abuse, harassment, retaliation, or staff neglect concerning PREA.

The Texas Board of Criminal Justice (TBCJ) PREA brochure, which is distributed to the public and is accessible to inmates, outlines ways for reporting sexual abuse and sexual harassment. Simply, offenders may report allegations in many ways, verbally, and in writing to departmental staff including the Major, to the Office of Inspector General (OIG), and to the PREA Ombudsman. Third parties, including fellow offenders, staff members, family members, attorneys, and advocates are permitted to assist offenders in requesting administrative remedies regarding an allegation of sexual abuse. Reporting information is also attainable through information on bulletin boards, in the institutional libraries, the public website, and through staff.

Reports to the PREA Ombudsman may be made confidentially or by third parties.

The Agency provides for at least one way for inmates to report sexual abuse or sexual harassment that is not part of the Texas Department of Criminal Justice. Reports can be made privately via the Texas Board of Criminal Justice (TBCJ) through the PREA Ombudsman's office which is out of the chain of command and operation of the TDCJ and has specifically been established to handle such private PREA reports.

The auditor assesses compliance for this standard, based on formal and informal interviews with staff and inmates, and his review of the above information, procedures, and policies.

#### **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)

Administrative Directives, AD-03.77, and AD-03.82 Offender Grievances and Management of Offender Grievances are available to inmates. These policies of the TDCJ outline the procedure for preparing, filing, and processing inmate grievances. Additionally, policies and procedures are established for filing emergency grievances. The Offender Grievance Operational Manual (OGOM) and the Texas Government Codes 493.014 and 501.008 further outline administrative procedures to address inmate grievances concerning sexual abuse and sexual harassment.

In accordance with the Safe Prisons/PREA Plan, the following steps are directed to unit grievance staff when utilizing the grievance procedure: "A) immediately telephone the highest-ranking security supervisor on duty of the grievance allegations, B) notify all unit Wardens, majors, chief of unit, classification, OIG, safe prisons/PREA compliance staff, and medical Department via the TDCJ mainframe email of the grievance allegations". The grievance process is an alternative to assist the inmate reporting sexual abuse or sexual harassment. It can be seen through this quote, the emphasis and importance the TDCJ places on reporting and on reporting through the grievance process, if chosen by the inmate.

In the past 12 months, there has been one (1) grievance filed that alleged sexual abuse at the Goree Unit. No extensions were requested or granted. This was an emergency grievance and had an initial response in 48 hours, and reached a final decision within the required five days.

Review of the grievance procedure, review of an actual grievance, and interviews with staff and inmates confirm an assessment of compliance for this standard.

#### **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)

Access to outside confidential support services is supported by the TDCJ through its Safe Prisons/PREA Plan, the Safe Prisons/PREA Operational Manual (SPPOM) and from the Texas Board of Criminal Justice policy BP-03.91, Uniform Offender Correspondent Rules.

Specifically, the PREA plan states "offender shall be provided access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers,

where available or local, state, or national victim advocacy crisis organizations. The unit shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible." Additionally, the SPPOM states "when an advocate, from the rape crisis center is not available to provide emotional support... the TDCJ shall, upon request of the offender victim, provide an Offender Victim Representative (OVR) to support the offender victim through the forensic medical examination process and in the investigatory interviews, the OVR shall provide emotional support, crisis intervention, information, and referrals. OVRs shall be approved by the unit to serve in this role and shall receive the necessary training concerning sexual assault, and forensic examination". OVR's have been identified at the Goree Unit (two were interviewed by the PREA auditor).

There is a rape crisis center in Huntsville, Texas and communications have been made with the center but confidential support services are, at this time, extended by the Goree Unit and not through the center.

The inmate handbook indicates the available emotional support services for sexual abuse victims, including the national and state Rape Advocacy Center listings.

Based on the auditor's interviews with staff and inmates, the auditor's communications with the local rape crisis center, and the auditor's review of the documentation submitted by the institution for this standard, the auditor assesses institutional compliance.

### **Standard 115.54 Third-party reporting**

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

The Texas Board of Criminal Justice (TBCJ) Ombudsman website provides a method to receive third-party reports of inmate sexual abuse or harassment. Executive Directives, ED-02.03 and ED-02.10, address information and procedures on how to report, to whom to report, and how to submit PREA complaints and inquiries. ED-02.10 attachment A, is a PREA Ombudsman inquiry response form containing specific allegations, institutional actions, and additional pertinent information that can assist and does assist in reporting. Simply, the website and phone number of the PREA Ombudsman are resources on how to make a third-party report. Policy states "the Texas Board of Criminal Justice (TBCJ) established the Prison Rape Elimination Act (PREA) Ombudsman's Office to investigate, process PREA complaints and inquiries in accordance with the Prison Rape Elimination Act Ombudsman's Policy Statement". Moreover, it directs the public to the TBCJ website where the name, mailing address, and phone number to be used for the purpose of directing inquiries and complaints to the PREA Ombudsman are available.

Additionally, the TDCJ brochure titled General Information Guide for Families of Offenders, outlines the Mission of the TDCJ, and gives a brief description of principle program areas for the family to review. The table of contents of the brochure lists everything from intake to an institutional/unit directory and includes a section for the TBCJ, PREA Ombudsman and third-party reporting.

The auditor reviewed the above documents and, in conjunction with staff and inmate interviews assessed this standard as compliant.

### **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)

All staff at the Goree Unit have a duty to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment.

The Safe Prisons/PREA Plan states that "all staff members shall immediately report, according to the TDCJ policy, any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred on a unit, whether or not it is a TDCJ facility; retaliation against offenders or staff who reported an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation".

Administrative Directive, AD-16.20 Reporting Incidents/Crimes to the Office of the Inspector General states that "employees shall report occurrences of allegations of administrative violations, criminal offenses, and other incidents required to be reported by this directive immediately upon becoming aware of such conduct or as soon as practical...". This directive also has an attachment A outlining incidents requiring immediate reporting, including sexual assaults and incidents of sexual misconduct.

The Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual further outline reporting procedures, including how and to whom, and also the prohibition of staff from revealing information related to sexual abuse reports (except to the extent necessary to make treatment, investigation, and other security and management decisions).

Interviews with staff, volunteers, contractors, as well as a review of training records, training documents, and the above information confirm the duty and responsibility to report and support compliance for this standard.

#### **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)

TDCJ Safe Prisons/PREA Operation Manual and the Administrative Directive, AD-02.15 outline the immediate action that is to be taken to protect inmates who are at substantial risk of sexual abuse. It also outlines the action to be taken to assist and implement appropriate protective measures without reasonable delay.

The Goree Unit institutional staff are very knowledgeable and well-trained in their protection duties when an inmate is subject to imminent sexual abuse or risk of imminent sexual abuse. Interviews with staff and inmates confirmed such, as well as review of the training curriculum and training records.

In the past 12 months there have been zero (0) number of times the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

Based on the above policies, information, and interviews with staff and inmates, the auditor assesses compliance for this standard.

#### **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)

The Safe Prisons/PREA Operations Manual, numbers 04.01, and 04.02, establish guidelines for processing offender reports of sexual abuse to or from other confinement facilities.

The policy indicates that the Warden "will notify the head of the facility or appropriate office of the agency where the alleged incident occurred, as soon as possible, but no later than 72 hours after receiving the allegation". Further, if the TDCJ unit receives notification of an allegation of sexual abuse, "The individual receiving such notification shall provide the notification to the unit Warden". Appropriate follow-up of these notifications are outlined in the SPPOM.

During the past 12 months, the Goree Unit has received two (2) allegations that an inmate was abused while confined at another facility. Appropriate contact and notifications were made. The auditor reviewed these two instances with the Warden and Institutional PREA Compliance Manager. During the past 12 months, the Goree Unit has received, from other facilities, two (2) allegations that an inmate was abused while at the Goree Unit. The auditor reviewed these two instances with the Warden and the Institutional PREA Compliance Manager. All four of these instances were appropriately investigated, contacts made, and notifications, as appropriate, were given. Documentation has been maintained.

Review of the investigations and documentation as well as the above referenced interviews supports compliance for this standard.

#### **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)

The Texas Department of Criminal Justice Safe Prisons/PREA Operating Manual and the TDCJ Administrative Directive, AD.-16.03, Evidence Handling, and the policy OIG-04.05 Offender Sexual Assault Investigation, all detail the policy and procedures for the first responder to an allegation of sexual abuse.

Specifically, the SPPOM indicates that the first security staff member to respond that an inmate was sexually abused, is required to separate the alleged victim and abuser, preserve and protect the crime scene, request the alleged victim to take no action to destroy evidence, and to make efforts to ensure that the alleged abuser does not take any action that could destroy evidence, and then notify the immediate supervisor or shift commander.

In the past 12 months there have been five (5) allegations that an inmate was sexually abused. Of these allegations, one had a security staff member be the first to respond to the report and separate the alleged victim and abuser.

In the past 12 months, the number of allegations where staff were notified in a time period that allowed for the collection of evidence was one (1). Again, in this one incident, the security staff member protected the crime scene, requested that the alleged victim not take actions that destroy physical evidence, and ensured the alleged abuser did not take actions that could destroy physical evidence.

In the past 12 months, there were zero (0) number of times a non-security staff member was the first responder.

Based on the above policies, the auditor's review of the reports and the incidences that occurred, and based on interviews with key staff, the auditor assesses compliance.

### **Standard 115.65 Coordinated response**

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

The TDCJ Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual directs responding to an allegation of sexual abuse and requires a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services, victim advocate or victim offender representatives, unit leadership, and others as necessary.

The Safe Prisons/PREA Plan details the coordinated actions that are to be taken in response to an incident of sexual abuse and states the following, "sexual abuse response and notification procedures contained within the plan and the SPPOM shall be followed to coordinate actions taken in response to an incident of sexual abuse".

The auditor reviewed the incidences reported and observed/noted the teamwork between departments, and staff at the Goree Unit and was impressed with communications, mutual support, and professionalism.

The auditor also interviewed the Warden, the Institutional PREA Manager, and other key staff concerning a coordinated response. Based on the interviews, the auditor's review, and the overall teamwork observed, the auditor assesses compliance for this standard.

### **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)
- Not Applicable

The TDCJ is not responsible for collective bargaining on the Agency's behalf. Collective bargaining agreements are not contracted such that there could be interference with the preservation of the Agency's ability to protect inmates. It is noted that Texas has independent dismissal resolution dispute mediation guidelines, but clearly Texas is a "right to work state".

Based on the above comment, the auditor assesses this standard as not applicable.

### **Standard 115.67 Agency protection against retaliation**

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

The Safe Prisons/PREA Plan of the Texas Department of Criminal Justice protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by staff or inmates. This is outlined in the Plan.

Furthermore, personnel policies covering Sexual Harassment and Discourteous Conduct of a Sexual Nature, General Rules of Conduct, Sexual Misconduct with Offenders, and Discrimination in the Workplace (PD-13, PD-22, PD-29, PD-31) also protect against retaliation.

There is a 90 day monitoring time period for retaliation review. There is an offender 90 day monitoring form and a staff 90 day monitoring form directing 30 day interval review during the 90 day timeframe.

The facility has designated to the Correctional Major, the responsibility of monitoring retaliation by inmates and the Warden is responsible for monitoring staff retaliation.

There have been zero (0) number of times of an incident of retaliation, which has occurred in the past 12 months.

Based on the above statements/discussion, the auditor assesses compliance.

### **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)

Administrative Directives, AD-03.50 Administrative Segregation and AD-04.63 Transient Status Offenders as well as the Agency's Administrative Segregation Plan, prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.

The Goree Unit has limited segregation cells and, as commented before, this staff makes very selective and judicious use of the Unit's segregation cells. If deemed such segregation is necessary, the Unit would explore other alternatives, such as transfer and reassignment.

There have been zero (0) number of inmates who allege to have suffered sexual abuse, who were held in involuntary segregated housing in the past 12 months.

Based on the auditor's review of the above policies, utilization of segregation cells, and the interviews with specialized staff, this standard is found compliant.

### **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)

The Safe Prisons/PREA Plan of the TDCJ, addresses investigations under general considerations. The plan directs the following: 1) a uniform evidence protocol to investigate sexual abuse and sexual harassment, 2) sexual investigation shall be conducted promptly, early, and objectively including third-party and anonymous reports, and 3) the use of investigators who have been specially trained in sexual abuse investigations pursuant the TDCJ Safe Prisons/PREA Plan. It is noted that this standard contains 12 subsections a-l, and, as with all standards and subsections, these were reviewed by the auditor utilizing policies, procedures, observations, and interviews.

Administrative Directive, AD-16.20 Reporting Incidents/Crimes to the Office of the Inspector General, establishes policy related to criminal and administrative investigations. The TBCJ Board Policy-01.07 directs that allegations of sexual misconduct which appear to be criminal are referred for prosecution.

The Office of the Inspector General addresses and insures retention of all written reports for as long as the alleged abuser is incarcerated or employed by the agency, +5 years.

Based on the above, the PREA auditor assesses compliance.

### **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)

The Agency, TDCJ, through its policies and procedures and specifically through the Safe Prisons/PREA Plan, imposes a standard of preponderance of the evidence for administrative investigations involving sexual abuse or sexual harassment.

The evidentiary standard in the Safe Prisons/PREA Plan by the TDCJ is as follows: "the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated". The information goes on to further inform us that a preponderance of the evidence means that more than 50% of the evidence supports the allegation. The standard also limits a facility's ability to raise this requirement.

Based on the Safe Prisons/PREA Plan and confirmed by interviews with the Warden, and investigators, the auditor finds this evidentiary standard in compliance.

### **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)

The Agency has a policy requiring that an inmate, who makes an allegation that he or she suffered sexual abuse, is informed by the facility, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.

The policies are outlined in the Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual (sections 5.05, 5.11, and attachments; form F, Unit Classification Committee Notification of Substantiated, Unsubstantiated, or Unfounded; form J, Offender Acknowledgment Form with signature/absence/refusal; and form M, Offender Notification signed by the Warden, with an original to the inmate.

Policy also prescribes that following an inmate's allegation that a staff member has committed sexual abuse against an inmate, the facility subsequently informs the inmate (unless unfounded) of certain issues such as whether the staff member is no longer posted, no longer employed, or has been indicted (this, from the Safe Prisons/PREA Operational Manual).

Documents, including the Warden's signed notification forms, and interviews with investigators and the Warden, confirm that when an inmate makes an allegation of suffered sexual abuse or sexual harassment, he is informed verbally or in writing as to whether or not the allegation was substantiated, unsubstantiated, or unfounded following an investigation.

Based on the above comments/discussion, review of policy, and interviews, the auditor assesses compliance.

**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)

Personnel policy of the TDCJ stipulates that employees or representatives of the Department are expected to adhere to the highest standards of conduct while on duty or off duty, including adherence to the Rules of Conduct and Outlines for Disciplinary Sanctions. It was notable to the auditor that he heard, during turnout (shift briefing), the shift supervisor informing and directing staff to remember where they worked (Goree Unit, TDCJ), and to make sure they represented the facility in a positive and professional way both on duty and off duty.

Executive Directive, ED-13, Sexual Harassment and Discourteous Conduct of a Sexual Nature, further outlines expectations of TDCJ employees.

Personnel policy, PD-29, Sexual Misconduct with Offenders, addresses sexual abuse, sexual harassment, sexual misconduct, and voyeurism with inmates.

The Texas Penal Code 39.04, addresses sexual abuse of inmates and the fact that it may rise to the level of a felony offense.

The Guidelines for Employees, details the sanctions and actions required, related to sexual abuse, sexual harassment, sexual misconduct, and voyeurism.

In the past 12 months there have been zero (0) number of staff from the facility that have been terminated, reported to law enforcement or licensing boards for violating agency sexual abuse or sexual harassment policies.

Based on the auditor's review and interviews with staff and inmates. This standard is assessed as compliant.

**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)

The TDCJ has a very thorough and comprehensive Volunteer Service Plan (VSP) which, in conjunction with the Safe Prisons/PREA Plan, outlines the responsibilities and conduct for volunteers and contractors who have contact with inmates. Special training and orientation is required of all volunteers and contractors.

Training of the volunteers and contractors is outlined in PREA standard 115.32. The VSP training and orientation, the volunteer services training video, and acknowledgment forms for training (and videos) for volunteers and contractors were reviewed by the auditor. It was clear, to the auditor, that every volunteer and contractor is made aware of how to appropriately conduct themselves and the gravity of discipline that may affect any volunteer or contractor who engages in sexual abuse and/or sexual harassment of an inmate, including notification of law enforcement agencies and/or licensing boards.

Volunteers and contractors signed acknowledgment forms indicating their orientation, training, and understanding of rules and regulations and appropriate behavior. The documentation is maintained.

In the past 12 months there have been zero (0) number of contractors or volunteers who have engaged in sexual abuse of inmates.

Based on the auditor's review of the above, and interviews with staff and contractors, this standard is assessed as compliant.

### **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)

The Inmate Discipline Policy, GR-106, Disciplinary Rules and Procedures for Offenders, and the Safe Prisons/PREA Plan outline disciplinary sanctions for inmate on inmate sexual abuse and sexual harassment. The inmate discipline policy clearly identifies individual disciplinary sanctions for inmates.

The Inmate Discipline Policy is a substantial 45+ page document outlining major and minor offenses, all with different levels of sanctions and detail, but clearly indicating a very formal disciplinary process by administrative action. Inmates are subject to disciplinary sanctions only pursuant this formal disciplinary process.

In the past 12 months there have been zero (0) number of administrative findings of inmate on inmate sexual abuse that have occurred at the Goree Unit. Additionally, in the past 12 months there have been zero (0) criminal findings of guilt for inmate on inmate sexual abuse that have occurred at this facility.

The Agency disciplines inmates for sexual conduct with staff only upon the finding that the staff member did not consent to such conduct. The Agency prohibits disciplinary action for reports of sexual abuse made in good-faith. The Agency also prohibits all sexual activity between inmates. The Agency direction is outlined in the Inmate Discipline Policy, GR 106, and the Agency Safe Prisons/PREA Plan. Institutional healthcare interventions, therapy, and counseling are addressed in the Correctional Managed Health Care policy, CMHC E-35.

Based on the auditor's review of the above policies and information, and based on interviews with staff and inmates, this standard is assessed as compliant.

### **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)

The Safe Prisons/PREA Plan, Safe Prisons/PREA Operational Manual (SPPOM) attachment E, and Correctional Managed Health Care policies, CMHC G-35.1, CMHC G-35.2, and CMHC G-57.1, stipulate that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant standard 115.41 are offered a follow-up meeting with a medical or mental health care practitioner. This meeting takes place within 14 days of intake screening.

In the past 12 months 100% of the inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. This data provided in the PREA Pre-Audit Questionnaire.

The healthcare policies mentioned above also address and outline treatment, services to victims and abusers, and the maintenance of documents and materials. Information related to sexual victimization or abusiveness that occurred in the institutional setting is strictly limited only to those responsible for treatment plans, housing, bed, work, education, and program assignments.

The UTMB healthcare staff are/were exceptionally professional in the performance of their duties, responsibilities, and information disclosure as observed by the PREA auditor. Interviews with UTMB health care staff were insightful and helpful, assisting the auditor to assess compliance with PREA standards.

Based on review of policy and procedure, supporting documents, tour and observation of the Medical Department, and interviews with key staff supports a "meet standards".

### **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)

Access to and from the Emergency Medical Treatment and Crisis Intervention Services is outlined in the Correctional Managed Health Care policies, CMHC A-01.1, CMHC G-57.1, and in the Safe Prisons/PREA Operational Manual (SPPOM). Policy CMHC A-01.1 specifically outlines the procedures which describe the UTMB processes whereby offenders have access to care needed to meet their medical, dental, and mental health needs.

The University of Texas Medical Branch Health Services are available at the Unit 16 hours daily and on-call services 24/7. Some Administrative and some Telemedicine/mental health care is available through shared services with the Huntsville Unit. Emergency medical/mental health care is available also through the Sheriff's Office of Walker County Emergency Medical Services (EMS) and the local hospital, Huntsville Memorial Hospital (HMH).

The nature and scope of services are determined by medical and mental health practitioners according to their professional judgment.

The auditor's review and discussion of policies and procedures, and all formal and informal interviews with specialized staff, supervisory staff, and inmates confirm compliance for this standard.

### **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)

As directed and outlined in the PREA Plan, SPPOM-05.01, SPPOM-05.05, attachment J, and CMHC G 57.1, the Goree Unit offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The PREA Plan is quoted as follows: 1) all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile unit shall be offered medical and mental health evaluation and treatment, as appropriate 2) the evaluation and treatment of sex offenders shall include..., Follow-up services, treatment plans, and when necessary referrals for continued care following their transfer to, or placement in other institutions, and in accordance with CMHC policies after their release from custody 3) the offender victim shall be provided medical and mental

health services, consistent with the community level of care... 4) not applicable (re: females) 5) offenders will be offered medically appropriate tests 6) a mental health evaluation of all offender on offender abusers is attempted with 60 days of hearing of the abuse, and treatment shall be offered when deemed appropriate in accordance with CMHC policies.

Brochures, handouts and materials on sexual assault awareness are distributed to the inmates during intake, advising the inmate population of offerings by medical and mental health care. Randomly selected inmates confirmed the UTMB's attention and care for victims and abusers pursuant PREA.

In addition to the review of documented referrals, and the above policies, the auditor interviewed a number of specialized UTMB health care staff, the Warden, and the Institutional PREA Manager, confirming compliance.

### **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)

The TDCJ Administrative Directive, AD 02.15, Operations of the Emergency Action Center (EAC) and Reporting Procedures for Serious and Unusual Incidents, and the Safe Prisons/PREA Plan, all direct that reports be made, which are to be reviewed by the Warden and the staff at the facility.

There is a monthly Safe Prisons/PREA Report outlined in the Safe Prisons/PREA Operational Manual, 08.01, which involves the Warden and the PREA Compliance Manager reviewing findings and implementing recommendations or improvements concerning sexual abuse incident reviews.

There is a Sexual Abuse Incident Review Team at the Goree Unit that includes the Assistant Warden, the Institutional PREA Manager, and other key staff including health services, that reviews sexual abuse incidents, unless the allegation has been determined to be unfounded.

In the past 12 months there have been three (3) criminal and/or administrative investigations of alleged sexual abuse completed at the facility excluding only unfounded incidents.

In the past 12 months there have been three (3) sexual abuse incident reviews. These incident reviews included a report of findings and recommendations for improvement. The auditor reviewed these reports with the Warden (which he had "signed off on"). Appropriate documentation, and action was noted.

This standard is assessed in compliance based on the above, review of documents, reports and the interviews with the Warden and key staff.

### **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)

The Agency and the Goree Unit collects accurate, uniform data for every allegation of sexual abuse. The Texas Board of Criminal Justice (TBCJ) has established policy outlining the mission of the PREA Ombudsman to serve as an independent office to monitor and conduct administrative investigations, as well as to provide a point of contact for the public, elected officials, and offenders who have complaints or inquiries regarding allegations of sexual assault, sexual contact, staff sexual

misconduct, or initiatives related to PREA. This also includes collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from each correctional facility. It directs that statistical information regarding the total number of allegations of sexual assault, sexual contact, and staff sexual misconduct investigated by the TDCJ, and the outcome of the investigations, and any disciplinary action resulting from the investigations will be made public and will be in the Annual Report (as required by TBCJ policy, BP-02.09).

The Survey of Sexual Violence (SSV), the standardized instrument for data collection which is used by and conducted by the Department of Justice, was completed by the Agency and was used as part of the documentation for compliance with this standard data collection 115.87. The auditor reviewed this report and monthly reports submitted by the Goree Unit.

Based on the reports, the survey, the PREA Ombudsman office website, and interviews with the Warden and the PREA Compliance Manager, the auditor assesses compliance.

### **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)

Interviews with Regional PREA Managers, Institutional PREA Managers, and Wardens confirm the TDCJ is continually assessing and collecting Prison Rape Elimination (PREA) data for corrective action in this largest state prison system. The auditor reviewed the PREA Ombudsman's website which contains a wealth of information concerning PREA and the safety and security of inmates. The auditor also reviewed monthly reports that are for the PREA Ombudsman's Office along with the compilation of the Unit information that was sent.

The auditor found, through review with the staff, review of monthly reports, review of Agency Annual Reports, and review of information from the Survey of Sexual Violence (SSV), that there is a coordinated effort to improve the effectiveness of the Agency's goals concerning PREA compliance, and the Agency's Safe Prisons/PREA Plan of sexual abuse prevention, detection, and response. These reports from the Unit and information solicited from the prison units assessing and identifying problems, assist in staff training and professional development and, in this auditor's opinion, assist in eliminating the inmate culture of silence and negative retaliatory behavior. Moreover, in keeping with generally accepted detention and correctional practices, this data collection and information and insights will improve overall institutional management operations.

The TDCJ website includes the following publications/information:

- 1) Administrative Review and Risk Management
- 2) Advisory Council on Ethics
- 3) Annual Review 2005-2014
- 4) Business and Finance
- 5) Correctional Institutions Division
- 6) Executive Administrative Services
- 7) Health Services
- 8) Human Resources
- 9) Internal Audit
- 10) Manufacturing and Logistics Division
- 11) Office of the General Counsel
- 12) Parole Division
- 13) PREA Ombudsman Safe Prisons Program Report 2009-2014
- 14) Reentry, and Integration Division
- 15) Rehabilitation Programs Division
- 16) Texas Board of Criminal Justice
- 17) Texas Correctional Office of Offenders with Medical or Mental Impairments
- 18) Victim Services.

Obviously there is a wealth of information outlined in the above. Particular attention was paid by the auditor to number 13 PREA Ombudsman and Safe Prisons Program Report which addresses PREA standard 115.88 and the data review.

The information and materials above, and interviews with the Warden and the Institutional PREA Manager, and the Regional PREA Manager, confirm compliance with this standard.

**Standard 115.89 Data storage, publication, and destruction**

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

The TDCJ Safe Prisons/PREA Plan ensures that incident-based and aggregate data are securely retained. The Agency maintains sexual abuse data collection materials pursuant to state statute, and the PREA standard 115.87, for at least 10 years after the initial date of collection, unless federal, state, or local law requires otherwise.

Agency policy requires that aggregated sexual abuse data from facilities under the TDCJ (private facilities it has contracted with), make data available to the public, at least annually, through its website. The PREA Ombudsman's Office makes this available in its website and also in its Annual Report. The auditor noted that PREA Summary Reports on individual TDCJ Texas units have been placed on the ombudsman's website.

Based on the review of documents and information and the retention schedule, and interviews with the Warden, the PREA Regional Manager and the Unit PREA Manager, the auditor finds this standard in compliance.

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

James Curington

Auditor Signature

May 2, 2016

Date