**Prison Rape Elimination Act (PREA) Audit Report**

**Adult Prisons & Jails**

- ☒ Interim
- ☒ Final

**Date of Interim Audit Report: N/A**

*If no Interim Audit Report, select N/A*

**Date of Final Audit Report: August 30, 2021**

### Auditor Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Lynni O'Haver</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email:</td>
<td><a href="mailto:lynni@preaauditing.com">lynni@preaauditing.com</a></td>
</tr>
<tr>
<td>Company Name:</td>
<td>PREA Auditors of America, LLC</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>P.O. Box 1071</td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td>Cypress, TX 77410</td>
</tr>
<tr>
<td>Telephone:</td>
<td>239.223.0947</td>
</tr>
</tbody>
</table>

**Date of Facility Visit:** July 14 – 16, 2021

### Agency Information

**Name of Agency:** Texas Department of Criminal Justice

**Governing Authority or Parent Agency (If Applicable):** State of Texas

**Physical Address:** 861-B I-45 North

**City, State, Zip:** Huntsville, Texas 77320

**Mailing Address:** P.O. Box 99

**City, State, Zip:** Huntsville, Texas 77342

- ☐ Military
- ☐ Private for Profit
- ☒ Private not for Profit
- ☐ Municipal
- ☐ County
- ☒ State
- ☐ Federal

**Agency Website with PREA Information:** https://www.tdcj.texas.gov/tbcj/prea/html

### Agency Chief Executive Officer

- **Name:** Bryan Collier
- **Email:** Bryan.Collier@tdcj.tex.gov
- **Telephone:** 936.437.2101

### Agency-Wide PREA Coordinator

- **Name:** Cassandra McGilbra
- **Email:** Cassandra.Mcgilbra@tdcj.texas.gov
- **Telephone:** 936.437.5570

**PREA Coordinator Reports to:** Honorable Patrick L. O’Daniel, Chairman of the Texas Board of Criminal Justice

**Number of Compliance Managers who report to the PREA Coordinator:** 6
## Facility Information

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Thomas R. Havins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address:</td>
<td>500 FM 45 East</td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td>Brownwood, Texas 76801</td>
</tr>
<tr>
<td>Mailing Address (if different from above):</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td></td>
</tr>
<tr>
<td>The Facility Is:</td>
<td>☒ Prison</td>
</tr>
<tr>
<td>Military</td>
<td>☐</td>
</tr>
<tr>
<td>Private for Profit</td>
<td>☐</td>
</tr>
<tr>
<td>Private not for Profit</td>
<td>☐</td>
</tr>
<tr>
<td>Municipal</td>
<td>☐</td>
</tr>
<tr>
<td>County</td>
<td>☒</td>
</tr>
<tr>
<td>State</td>
<td>☒</td>
</tr>
<tr>
<td>Federal</td>
<td>☐</td>
</tr>
<tr>
<td>Facility Type:</td>
<td></td>
</tr>
<tr>
<td>Facility Website with PREA Information:</td>
<td><a href="https://www.tdcj.texas.gov/tbcj/prea/html">https://www.tdcj.texas.gov/tbcj/prea/html</a></td>
</tr>
<tr>
<td>Has the facility been accredited within the past 3 years?</td>
<td>☒ Yes</td>
</tr>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):</td>
<td></td>
</tr>
<tr>
<td>ACA</td>
<td>☒</td>
</tr>
<tr>
<td>NCCHC</td>
<td>☐</td>
</tr>
<tr>
<td>CALEA</td>
<td>☐</td>
</tr>
<tr>
<td>Other (please name or describe):</td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>☐</td>
</tr>
<tr>
<td>If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:</td>
<td>A Division Level Operational Review was conducted at the Havins Unit. These reviews are conducted by each functional area proponent at least every three years.</td>
</tr>
</tbody>
</table>

### Warden/Jail Administrator/Sheriff/Director

| Name: | Angela Chevalier |
| Email: | Angela.Chevalier@tdcj.texas.gov |
| Telephone: | 254.248.7339 |

### Facility PREA Compliance Manager

| Name: | Michael Maldonado |
| Email: | Michael.Maldonado@tdcj.texas.gov |
| Telephone: | 352.643.5575 |

### Facility Health Service Administrator

| Name: | Terre Harris |
| Email: | Terre.Harris@ttuhs.edu |
| Telephone: | 325.643.5575 |

### Facility Characteristics

| Designated Facility Capacity: | 596 |
| Current Population of Facility: | 493 |
| Average daily population for the past 12 months: | 430 |
| Has the facility been over capacity at any point in the past 12 months? | ☐ Yes  ☒ No |
| Which population(s) does the facility hold? | ☐ Females  ☒ Males  ☐ Both Females and Males |
| Age range of population: | 18 – 73 |
| Average length of stay or time under supervision: | 6 months |
| Facility security levels/inmate custody levels: | Minimum, SAFPF / IPTC |
| Number of inmates admitted to facility during the past 12 months: | 482 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more: | 482 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more: | 482 |
| Does the facility hold youthful inmates? | ☐ Yes  ☒ No |
| Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates) | ☒ N/A |
| Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)? | ☐ Yes  ☒ No |
| Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies): | ☐ Federal Bureau of Prisons  ☐ U.S. Marshals Service  ☐ U.S. Immigration and Customs Enforcement  ☐ Bureau of Indian Affairs  ☐ U.S. Military branch  ☐ State or Territorial correctional agency  ☐ County correctional or detention agency  ☐ Judicial district correctional or detention facility  ☐ City or municipal correctional or detention facility (e.g. police lockup or city jail)  ☐ Private corrections or detention provider  ☐ Other - please name or describe:  ☒ N/A |
| Number of staff currently employed by the facility who may have contact with inmates: | 146 |
| Number of staff hired by the facility during the past 12 months who may have contact with inmates: | 22 |
| Number of contracts in the past 12 months for services with contractors who may have contact with inmates: | 3 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | Medical – 8; Windham – 5; MTC - 20 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 50 |
### Physical Plant

<table>
<thead>
<tr>
<th>Number of buildings:</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of inmate housing units:</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a “housing unit” defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of single cell housing units:</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of multiple occupancy cell housing units:</td>
<td>1</td>
</tr>
<tr>
<td>Number of open bay/dorm housing units:</td>
<td>3</td>
</tr>
<tr>
<td>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</td>
<td>8</td>
</tr>
<tr>
<td>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</td>
<td>Yes ☒ No ☐ N/A</td>
</tr>
<tr>
<td>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</td>
<td>Yes ☐ No ☒</td>
</tr>
<tr>
<td>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</td>
<td>Yes ☐ No ☒</td>
</tr>
</tbody>
</table>

### Medical and Mental Health Services and Forensic Medical Exams

<table>
<thead>
<tr>
<th>Are medical services provided on-site?</th>
<th>Yes ☒ No ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are mental health services provided on-site?</td>
<td>Yes ☒ No ☐</td>
</tr>
</tbody>
</table>
Where are sexual assault forensic medical exams provided? Select all that apply.
- ☐ On-site
- ☑ Local hospital/clinic
- ☐ Rape Crisis Center
- ☐ Other (please name or describe:)

### Investigations

#### Criminal Investigations

<table>
<thead>
<tr>
<th>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</th>
<th>Office of Inspector General (OIG) - 139</th>
</tr>
</thead>
</table>
| When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply. | ☐ Facility investigators  
 ☑ Agency investigators  
 ☑ An external investigative entity |

Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)
- ☐ Local police department  
- ☐ Local sheriff’s department  
- ☐ State police  
- ☐ A U.S. Department of Justice component  
- ☑ Other (please name or describe: Office of Inspector General - OIG)  
- ☐ N/A

#### Administrative Investigations

| Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment? | 15 |
| ☑ Facility investigators  
 ☐ Agency investigators  
 ☑ An external investigative entity |

When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply

Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)
- ☐ Local police department  
- ☐ Local sheriff’s department  
- ☐ State police  
- ☐ A U.S. Department of Justice component  
- ☑ Other (please name or describe: Office of Inspector General (OIG) conducts Administrative Investigations on Staff)  
- ☐ N/A
Audit Findings

Audit Narrative (including Audit Methodology)

The auditor’s description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, and observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor’s process for the site review.

Audit Narrative

The Texas Department of Criminal Justice, Thomas R. Havins Unit is located at 500 FM 45 East in Brownwood Texas. Brownwood Texas is located in west-central part of the state approximately 78 miles southeast of Abilene Texas.

Thomas R. Havins Unit (Havins Unit) is participating in the Prison Rape Elimination Act (PREA) audit. The on-site portion of the audit was conducted by a certified Department of Justice PREA Auditor, at the above address on July 14 - 16, 2021. The assigned PREA Auditor is an independent sub-contractor with no conflict of interest, working for the primary contract holder for the Texas Department of Criminal Justice. This is the third audit for Havins Unit; the first audit was completed on July 14 – 16, 2015 and the second audit was completed on July 11 – 13, 2018.

Additionally, the Texas Department of Criminal Justice (TDCJ) utilizes the title Safe Prisons/PREA Manager for PREA Compliance Manager and the Texas Board of Criminal Justice (TBCJ) utilizes the title of PREA Ombudsman for PREA Coordinator.

Pre-Onsite Audit Phase

On June 2, 2021, the Auditor sent an introduction email to Havins Unit Staff and the Texas Board of Criminal Justice PREA Ombudsman.

Along with a brief introduction, in the Auditor’s email to the facility and to the Texas Board of Criminal Justice (TBCJ) PREA Ombudsman, the Auditor discussed the use of a paper audit, audit logistics, audit schedule / timelines, goals, and expectations of the audit. The Auditor also discussed that further communication for requests will be completed through the TDCJ Administrative Review & Risk Management Division (ARRM) PREA Office.
On June 2, 2021, the Auditor emailed the TDCJ PREA ARRM Office the PREA Audit Notifications (English/Spanish), provided the deadline for posting the notifications, requested the notifications be posted in accordance with the required standards, and requested for date and time stamped pictures of all posted PREA Audit Notifications in the facility.

The PREA Audit Notifications contained the Auditor’s name and mailing address (P.O. Box) for confidential correspondence from inmates or staff relating to PREA prior to, during, and after the PREA audit. The audit notifications also contained the scheduled dates of the audit, the purpose of the audit, and a statement regarding the confidentiality of any communication between the Auditor and inmates who respond to the notice with the exception of mandatory reporting laws that may apply to the Auditor. The Post Office box acquired for the audit was used strictly for correspondence from inmates or staff for the purpose of the PREA Audit.

On June 4, 2021, the Auditor received pictures of the PREA Audit Notifications posted throughout the facility and in various locations. The notifications were posted in areas visible for staff and inmates. The pictures were time and date stamped with June 2, 2021.

During the on-site tour of the facility, the Auditor observed the audit notifications posted throughout the facility. The audit notifications were posted in visible locations where inmate traffic is high. These locations included every housing dormitory, throughout each building – programs, educational, and vocational – in assigned inmate work areas, (Food Service, Laundry, & Maintenance), Chapel, and Visitor Park (VP).

On June 4, 2021, the Auditor received the secured thumb drive sent registered mail from the TDCJ PREA ARRM Office. The secured thumb drive contained the Pre-Audit Questionnaire, TDCJ policies and procedures, and supporting documents for each PREA standard.

On July 1, 2021, the Auditor began a systematic review process of the Pre-Audit Questionnaire responses to each standard and the supporting documentation, policies, and procedures. Supporting documentation included, but not limited to:

- Texas Department of Criminal Justice Policies & Procedures
- Existing contracts between TDCJ and external entities
- Inmate intake screenings & assessments
- Inmate medical & mental health assessments
- Allegations of sexual abuse & sexual harassment reported in the 12 months preceding the audit
- Staff roster (certified & civilian staff, contract, & volunteer; requested by shift assignment/work hours)
- List of New Hires & Promotions from the last 12 months
- Inmate Rosters by Housing location for Havins Unit
- Inmates identified as LEP; hearing, cognitive, vision, and physically impaired;
- Inmates who identify as LGBTI
- Informal & Formal PREA related grievance reports
- Facility Site Map
- All Sexual abuse & sexual harassment Administrative Investigations – April 2020 – March 2021
  - (Substantiated, unsubstantiated, inmate-on- inmate, staff-on-inmate)
- All Sexual abuse & sexual harassment Criminal Investigations – April 2020 – March 2021
  - (Substantiated, unsubstantiated, inmate-on-inmate, staff-on-inmate)

On July 3, 2021, the Auditor completed her review of the PAQ and supporting documentation; no further requests for additional documentation or clarification were needed at this time.

On July 10, 2021, the Auditor emailed the Facility Warden to finalize on-site logistics and provided the staff interview list:

- Agency Head or Designee
- Administrative (Human Resources) Staff
- Agency Contract Administrator
- Classification Staff
- Contractors & volunteers who have contact with inmates
- Designated Staff who monitor retaliation
- Incident Review Team
- Intake Staff
- Intermediate or Higher-level Facility Staff
- Investigative Staff
- Medical & Mental Health Staff
- PREA Compliance Manager
- PREA Coordinator
- SANE/SAFE Staff
- Security Staff – First Responders
- Staff who perform screening for risk of victimization
- Volunteers / Contractors
- Warden

The total number of PREA related incidents / correspondence received by the PREA Ombudsman from inmates at the Havins Unit during the 12 months preceding the audit were zero. The number of sexual abuse and sexual harassment allegations in the 12 months preceding the audit (April 2020 – March 2021) was zero.
Research

During the pre-on-site audit phase, the Auditor conducted an internet search on the facility to include reviewing the agency website. The agency website contained multiple links to previous annual reports and audits for Havins Unit as well as other facilities under the agency’s jurisdiction. The Auditor reviewed the prior PREA Audits (July 2015, July 2018) and the Annual Reports (§115.88). The Auditor also reviewed the mandatory reporting laws for the State of Texas.

The Auditor contacted Just Detention International (JDI), a health and human rights organization that seeks to end sexual abuse in all forms of confinement. The Auditor submitted an inquiry to determine if the agency had received any complaints from Havins Unit within the past 12 months; a representative from Just Detention International informed the Auditor that Just Detention International had not received any complaints regarding Havins Unit.

The Auditor also conducted research, specific to Havins Unit, on the websites of the Department of Justice Civil Rights Division and the Southern Poverty Law Center with negative results from each.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, Office of Attorney General (OAG) Law Enforcement Request for Sexual Assault Exam form, and the Memorandum of Understanding (MOU) between TDCJ and the ARK Domestic Violence + Sexual Assault Shelter.

The ARK Domestic Violence + Sexual Assault Shelter is located in Brownwood Texas. The ARK provides safe shelter and comprehensive resident and non-resident services through advocacy, referrals, and education to support and empower victims of domestic violence and sexual assault.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the ARK. The victim advocate confirmed the existing MOU and the services provided to inmates at the TDCJ Havins Unit. The services provided to the inmates at Havins Unit include accompanying and providing emotional support services, crisis intervention, information, and referrals to the inmate survivor during forensic medical examinations. Additional services include accompany and support the inmate during investigatory interviews upon request of the inmate, provide follow-up face-to-face emotional support services advocate upon request,
receive and conduct private and confidential phone calls with inmates which allows in-depth counseling with an advocate/counselor and immediate crisis intervention, and provide sexual abuse educational information upon written request from inmates.

The Auditor did not receive any correspondence from staff or inmates prior to, during, or after the PREA audit.

**On-Site Audit Phase**

Thomas R. Havins Unit is located at 500 FM 45 East in Brownwood Texas. Brownwood Texas is located in west-central part of the state approximately 78 miles southeast of Abilene Texas.

Under the jurisdiction of the Texas Department of Criminal Justice, Havins Unit is a six-month In-Prison Therapeutic Community (IPTC) facility, with the goal to rehabilitate substance abusers through rehabilitative programs in an effort to reintegrate inmates into society.

Havins Unit is classified as a minimum-security facility, which houses minimum (G1 and G2), transient, and In-Prison Therapeutic Community (IPTC) custody level male inmates. Havins Unit is not designated as a youthful offender facility.

The rated capacity of Havins Unit is 596 with an average daily population (ADP) of 430 for the 12 months preceding the audit. The inmate population on the first day of the audit was 556.

Havins Unit, a minimum-security facility, is located on 297 acres of state property; seven of the 297 acres are within the secured perimeter. The facility is enclosed with a single 12-foot perimeter fence supplemented with a row of steel razor ribbon. The perimeter is monitored by armed mobile post, which operates between 1400 hours and 0600 hours. Two entrances allow for pedestrians and vehicles to securely enter and exit the perimeter via two-drive-through gates.

Havins Unit has eight buildings within the secure compound that provides space for Administration, Visiting, Food Service, Inmate Programs, Medical, Commissary, Maintenance, Laundry, and housing units. Buildings 1, 2, and 3 are designated as housing units with dormitory style housing. Each building contains three separate dorms (A, B, and C Dorm) with each dorm housing up to sixty-four inmates. Special Management Area (SMA) is located
within the medical building and is used for treatment separation, and has four holding dorms and eight single separation cells.

On Wednesday July 14, the first day of the audit, an entrance meeting was held with the Facility Warden, Major, Safe Prisons/PREA Compliance Manager, and a multitude of Supervisors and Staff from the Havins Unit. The Auditor toured the Havins Unit from 0915 hours to 1145 hours. The Auditor was escorted by the Facility Warden, Major, Safe Prisons/PREA Compliance Manager, and various Facility Staff members.

The Auditor used the National PREA Resource Center, PREA Compliance Instrument-Instructions for PREA Audit Tour when conducting the on-site review. The areas visited, for each facility, included occupied dormitory areas, medical area, intake and transfer, security control rooms, classification, food service, laundry, library, educational, vocational, and program areas, work assignment areas, and facility Chapel.

During the tour, the Auditor observed opposite gender announcements, tested the inmate phone system in the dormitories, viewed PREA Audit notifications posted throughout, and PREA educational material and contact information for rape crisis counseling and emotional support services. The Auditor observed the PREA information posted in each dormitory, inmate common areas, program and educational areas, and in the facility lobby.

The Auditor did not observe any issues with privacy or line of sight; announcements are made when opposite gender enters the dormitory. The shower and bathroom areas within each dorm contain privacy walls, which are constructed in such a manner that provides privacy as well as allowing staff to have a partial view of the inmate (walls covers midsection of the body); this allow privacy as well as ensuring the safety and security of all inmates. The Auditor did not observe blind spots during the facility tour.

The Facility Staff provided a complete overview of the inmate classification process and the risk screening process. The Auditor was able to observe these processes when the Classification Supervisor described the interview process and how utilizing the 72 Hour Assessment & Special Assessment helps determine an inmate’s risk screening, and needs assessment. The Classification Supervisor provided the Auditor with a detailed overview of how the classification process begins upon their arrival to the facility, including one within 30 days of arrival, as well as multiple follow-up interviews during their incarnation at the facility.
Throughout the facility tour, the Auditor observed inmates participating in educational programs, various inmate movement throughout the facility, and inmates actively working in assigned jobs throughout the facility compound. The Auditor was able to observe the interaction between staff and inmates inside the housing units and throughout the facility and conduct informal interviews of certified staff, civilian staff, contract staff, and inmates in each dormitory and throughout the facility compound.

Havins Unit is not equipped with video monitoring or other electronic monitoring. The Auditor noted throughout the facility tour and throughout the on-site phase, the high number of staff members, security and non-security, present in all areas throughout the facility. During the on-site phase, the Auditor conducted sixty-two formal and informal inmate interviews. During these interviews, the Auditor inquired to each inmate if the number of staff present is a true representation of the normal operations of the facility. Fifty-four of the sixty-two inmates confirmed the number of staff present during the on-site phase of the audit is a true representation of the number of staff present on any given day at the facility. Inmates explained the high number of staff is necessary for the treatment program to function properly and that all inmates are required to participate.

Additionally, several inmates explained to the Auditor the intensity of the program requires inmate participation in various treatment programs for half a day each day, followed by four hours working in assigned jobs throughout the compound. The responses received during inmate interviews confirmed that the initial observations (high number of staff present), as well as, information obtained in the informal interviews with staff, and the overview of the Havins Unit IPTC program provided by the Facility Warden confirmed the Auditor’s observations and a true representation of the normal staffing levels at the facility.

**Staff Interviews**

The PREA Auditor handbook requires Auditors to interview a representative sample of staff, supervisors, and administrators in the audited facility. Auditors must conduct interviews with a random sample of staff selected from varying shifts and work assignments, as well as targeted interviews with staff, which have specialized roles and responsibilities within the facility.

The Auditor conducted twelve random staff interviews. This random selection of staff included at least one member from each shift, staff from diverse work assignments, supervisors and line staff, males and females, and staff of various diversities. Havins Unit has two security staff shifts working 0600 – 1800 hours and 1800 – 0600...
hours. Contract medical shift hours are 0800 – 1700 hours and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 146 staff employed at the facility who have contact with inmates.

Twenty-seven specialized staff interviews were conducted and were selected based upon their work assignment and subject matter expertise. Interviews were conducted in designated rooms that provided privacy and all interviews were conducted without interruption.

At the time of the audit, the facility had 33 contractors and 50 volunteers authorized to enter the facility and who may have contact with inmates. Interviews with staff were conducted in designated rooms that provided privacy and were all completed without interruption.

All staff interviews were conducted in accordance with the National PREA Resource Center PREA Compliance Audit Instruments Interview Guide. Upon arrival to the facility, the Auditor requested an updated employee roster to assist with the selection process for the random and targeted staff interviews. A detailed list and quantities for each interviewed are listed below:

<table>
<thead>
<tr>
<th>Staff Categories</th>
<th>Number of Interviews Conducted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Random Sample of Staff:</td>
<td>12</td>
</tr>
<tr>
<td>Agency and PREA Staff:</td>
<td></td>
</tr>
<tr>
<td>Agency Head or designee</td>
<td>1</td>
</tr>
<tr>
<td>Facility Warden</td>
<td>1</td>
</tr>
<tr>
<td>PREA Coordinator</td>
<td>1</td>
</tr>
<tr>
<td>PREA Compliance Manager</td>
<td>1</td>
</tr>
<tr>
<td>Specialized Staff:</td>
<td></td>
</tr>
<tr>
<td>Agency Contract Administrator</td>
<td>1</td>
</tr>
<tr>
<td>Administrative / Human Resource Staff</td>
<td>1</td>
</tr>
<tr>
<td>Designated staff member monitoring retaliation</td>
<td>1</td>
</tr>
<tr>
<td>First Responders (Security &amp; Non-Security)</td>
<td>5</td>
</tr>
<tr>
<td>Incident Review Team</td>
<td>1</td>
</tr>
</tbody>
</table>
### Intake Staff

1

### Intermediate or Higher level Facility Staff

2

### Investigative Staff

1

### Medical Staff

1

### Mental Health Staff

1

### Rape Crisis / Advocacy Center Staff

1

### SANE/SAFE

1

### Staff who supervise inmates in Seg housing

1

### Staff who screen for risk of victimization & abusiveness

1

### Volunteers / Contractors

4

---

<table>
<thead>
<tr>
<th>Staff Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Random Staff Interviewed</td>
<td>12</td>
</tr>
<tr>
<td>Total Agency and PREA Staff</td>
<td>4</td>
</tr>
<tr>
<td>Total Specialized Interviewed</td>
<td>23</td>
</tr>
<tr>
<td>Total Staff Interviewed</td>
<td>39</td>
</tr>
</tbody>
</table>

---

### Inmate Interviews

The inmate count on the first day of the audit was 556. In accordance with the PREA Auditor Handbook Table 1: Required Number of Inmate Interviews, the Auditor was required to conduct 15 random sample inmate interviews. All inmate interviews were conducted in accordance with the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide.

The Auditor conducted twenty-eight random inmate interviews. The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided; inmates interviewed included every housing dormitory and inmates of various diversities.

In accordance with the PREA Auditor Handbook Table 1: Required Number of Inmate Interviews, the Auditor was required to interview at least 20-targeted inmates. The Auditor conducted three targeted inmate interviews. The facility provided documentation confirming several of the targeted inmate categories were not housed at
their facility at the time of the on-site review. In addition, during specialized staff interviews, the Auditor confirmed with the Facility Warden, PREA Compliance Manager, and Classification Staff Member, Havins Unit did not have the targeted inmate categories, initial requested by the Auditor, were released prior to the on-site or were not housed at the facility at the time of the on-site. As a result, these categories (targeted) of inmates were not interviewed.

- Youthful inmates
- Inmates with a cognitive disability
- Non-heterosexual inmates
- Transgender or intersex inmates
- Inmates in segregated housing for high risk of sexual victimization
- Inmates who reported sexual abuse
- Inmates who disclosed Sexual Victimization during Intake

As previously stated in the report, at the time of the on-site phase of the audit, Havins Unit does not house youthful inmates. Havins Unit reported during the twelve months prior to the audit, there were no inmates placed in segregated housing due to risk of sexual victimization. During the twelve months prior to the audit, Havins Unit reported no incidents of sexual abuse or sexual harassment. Havins Unit reported eight inmates disclosed prior sexual victimization during the twelve months prior to the audit, however, at the time of the on-site, the facility provided the Auditor with documentation showing all eight inmates either were released from custody of the TDCJ or were transferred to another correctional facility and unavailable for an interview.

All inmate interviews were conducted in accordance with the National PREA Resource Center PREA Compliance Audit Instruments Interview Guide. The Auditor requested an updated facility inmate roster to assist with the selection process for the random and targeted inmate interviews. All interviews were conducted in private and without interference. A detailed list and quantities for each interviewed are listed below:

<table>
<thead>
<tr>
<th>Inmate Categories</th>
<th>Number of Interviews Conducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Random Sample of Inmates:</strong></td>
<td></td>
</tr>
<tr>
<td>Informal</td>
<td>34</td>
</tr>
<tr>
<td>Formal</td>
<td>28</td>
</tr>
<tr>
<td><strong>Targeted Inmates:</strong></td>
<td></td>
</tr>
<tr>
<td>Inmates with a physical disability</td>
<td>1</td>
</tr>
<tr>
<td>Inmates who are limited English proficient</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Total Random Inmates interviewed</td>
<td>62</td>
</tr>
<tr>
<td>Total Targeted Inmates interviewed</td>
<td>3</td>
</tr>
<tr>
<td>Total Inmates interviewed</td>
<td>65</td>
</tr>
</tbody>
</table>

**On-site Documentation Review**

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator from the Office of Inspector General and requested to the Investigator to provide an overview of the investigative process and the documentation required in a case when an allegation of sexual abuse or sexual harassment incident occurs within the facility. The Investigator explained upon receiving notification of a sexual assault incident, the investigation is initiated promptly and is completed thoroughly and objectively by a qualified investigator from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations. The Investigator explained the initial process includes conducting scene investigation, collecting evidence (biological or trace), photographs, interview staff, witnesses, review unit documentation pertaining to the investigation, and interviewing the victim – depending on emotional and physical state.

The Investigator also provided an overview of the various documents contained in each case file. These documents include but not limited to the initial incident reports, notifications, medical and mental health forms, inmate rosters, advocacy information, witness statements, victim and alleged aggressor statements, investigative report, Office of the Inspector General Inquiry Report, notification of case disposition to inmate (offender acknowledgement), 90-day monitoring, / status check history, and the *Required Procedures Log.*

Employee personnel files are maintained in the Human Resources Department at the agency’s Central Office. Employee criminal background checks and training records are maintained in the employee personnel files. The Auditor reviewed documentation from twelve employee personnel files. The Auditor selected files of a newly hired employee, long-term staff members, recently promoted staff members, and employees with specialized
training. All files reviewed contained the required training documentation, revealed thorough background investigations, and included updated documentation of current background investigations for current staff members.

During the on-site phase of the audit, the Auditor reviewed thirty-one inmate records. These records were selected based upon length at facility, inmates who disclosed prior sexual victimization or inmates that disclosed sexual orientation as gay, bisexual, transgender, or intersex. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility’s policy.

Medical and mental health files are maintained in a secured section of the medical office. The Auditor reviewed eight secondary medical and mental health files. These files were reviewed based upon the screening for risk of sexual victimization, or those inmates who identify as gay, bisexual, or transgender.

The list below details the documentation reviewed from the various files:

<table>
<thead>
<tr>
<th>Type of File</th>
<th>Number of Files Reviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investigative Case files</td>
<td>0</td>
</tr>
<tr>
<td>Human Resources (Personnel / Training) files</td>
<td>12</td>
</tr>
<tr>
<td>Inmate Institutional Records</td>
<td>31</td>
</tr>
<tr>
<td>Medical &amp; Mental Health (secondary)</td>
<td>8</td>
</tr>
<tr>
<td>Total number of files reviewed</td>
<td>51</td>
</tr>
</tbody>
</table>

Exit Briefing

At the conclusion of this audit, an exit meeting was held with the Facility Warden, Major, Safe Prisons/PREA Compliance Manager, and Facility Supervisors and Staff to discuss the audit findings. The Auditor informed all in attendance the need to review on-site observations, documentation, and interview responses in order to determine compliance for each standard and provision.
Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Facility Characteristics

Thomas R. Havins Unit is located at 500 FM 45 East in Brownwood Texas. Brownwood Texas is located in west-central part of the state approximately 78 miles southeast of Abilene Texas.

Under the jurisdiction of the Texas Department of Criminal Justice, Havins Unit is a six-month In-Prison Therapeutic Community (IPTC) facility, with the goal to rehabilitate substance abusers through rehabilitative programs in an effort to reintegrate inmates into society.

Havins Unit is classified as a minimum-security facility, which houses minimum (G1 and G2), transient, and In-Prison Therapeutic Community (IPTC) custody level male inmates. Havins Unit is not designated as a youthful offender facility.

The rated capacity of Havins Unit is 596 with an average daily population (ADP) of 430 for the 12 months preceding the audit. The inmate population on the first day of the audit was 556.

Havins Unit, a minimum-security facility, is located on 297 acres of state property; seven of the 297 acres are within the secured perimeter. The facility is enclosed with a single 12-foot perimeter fence supplemented with a row of steel razor ribbon. The perimeter is monitored by armed mobile post, which operates between 1400 hours and 0600 hours. Two entrances allow for pedestrians and vehicles to securely enter and exit the perimeter via two-drive-through gates.

Havins Unit is not equipped with video monitoring or other electronic monitoring. The Auditor noted throughout the facility tour and throughout the on-site phase, the high number of staff members, security and non-security, present in all areas throughout the facility.
Havins Unit has two security staff shifts working 0600 – 1800 hours and 1800 – 0600 hours. Contract medical shift hours are 0800 – 1700 hours for both facilities and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 146 staff employed at the facility who have contact with inmates.

Medical and Mental Health Staff are contracted with University of Texas Medical Branch. Contract medical shift hours are 0800 – 1700 hours. The facility provides various mental health services and programs. The Food and Canteen Services are state employees.

The PAQ indicated there are 33 contractors and 50 volunteers. Examples of services provided at Havins Unit include various worship services, Substance Abuse Education, Life Skills, Parent Training, Support Groups, Religious and Faith Based Studies and Activities.
**Summary of Audit Findings**

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

**Auditor Note:** No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

<table>
<thead>
<tr>
<th>Standards Exceeded</th>
<th>Number of Standards Exceeded: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>List of Standards Exceeded:</td>
<td>115.33; 115.43; 115.51; 115.65</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standards Met</th>
<th>Number of Standards Met: 41</th>
</tr>
</thead>
<tbody>
<tr>
<td>List of Standards Met:</td>
<td>115.11; 115.12; 115.13; 115.14; 115.15; 115.16; 115.17; 115.18; 115.21; 115.22; 115.31; 115.32; 115.34; 115.35; 115.41; 115.42; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.64; 115.66; 115.67; 115.68; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.88; 115.89; 115.401; 115.403</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standards Not Met</th>
<th>Number of Standards Not Met: N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>List of Standards Not Met:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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Facility Name – Thomas R Havins Unit
## Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? ☒ Yes ☐ No

### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA

### Auditor Overall Compliance Determination

- ☐ Exceeds Standard (*Substantially exceeds requirement of standards*)
- ☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ Does Not Meet Standard (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s
conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Organizational Chart
Texas Department of Criminal Justice Board Policy 02.09, Prison Rape Elimination Act Ombudsman
Texas Department of Criminal Justice Executive Directive 03.03, Safe Prisons Program
Texas Department of Criminal Justice Post Order 07.150, Unit Safe Prisons/PREA Manager

Interviews conducted with:
PREA Coordinator / Ombudsman
PREA Compliance Manager

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the TDCJ shall take a proactive approach concerning the detection, prevention, response, and punishment of sexual abuse, including consensual sexual contact while in TDCJ custody. Agency policies also outline the facility’s zero-tolerance toward all forms of sexual abuse and sexual harassment and details the facilities approach in establishing a safe environment for all inmates.

Agency policies and the TDCJ Safe Prisons/PREA Plan outline the role and responsibilities of the PREA Ombudsman (Coordinator) to include being provided the time and authority to develop, implement, and oversee the Agency’s efforts to comply with the PREA standards at each facility. The agency’s organizational chart reflects the PREA Ombudsman (Coordinator) position is an upper-level position and is agency wide. The PREA Ombudsman (Coordinator) reports to the Texas Board of Criminal Justice.

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Ombudsman who verified she has sufficient time and authority in her position to accomplish PREA responsibilities for the agency. The PREA Ombudsman oversees six regional coordinators who monitor and support PREA compliance at each of the prison operations within the assigned regions. The PREA Ombudsman reports directly to the Texas Board of Criminal Justice. A review of the TDCJ organizational chart provided evidence that the agency has designated an upper-level position as the PREA Coordinator.
Agency policies and the TDCJ Safe Prisons/PREA Plan outline the role and responsibilities of the PREA Compliance Manager to include sufficient time and authority to develop, implement, and oversee efforts to comply with the PREA standards at the unit level. The agency organizational chart reflects the Unit Safe Prisons/PREA Compliance Manager reports to the Senior Warden.

During the on-site phase of the audit, the Auditor interviewed the PREA Compliance Manager for Havins Unit and verified he has sufficient time and authority in his position to accomplish the PREA responsibilities. Evidence shows that the Texas Department of Criminal Justice has designated a facility PREA Compliance Manager for the Havins Unit as verified through a review of the TDCJ organizational chart and through interviews with the PREA Compliance Manager and the Facility Warden.

During the on-site phase of the audit, the Auditor interviewed the Facility Warden and confirmed the responsibilities of the PREA Compliance Manager assigned to the Havins Unit. The Facility Warden verified the PREA Compliance Manager is provided sufficient time and authority in his position to accomplish these responsibilities.

Upon review of the policy and the agency organizational chart and upon completion of interviews conducted with the PREA Coordinator, PREA Compliance Manager, and Facility Warden during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

**Standard 115.12: Contracting with other entities for the confinement of inmates**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity’s obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ✗ Yes ☐ No ☐ NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards?
(N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ☒ Yes  ☐ No  ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:

Texas Department of Criminal Justice Administrative Directive 02.46, Entities Contracting with TDCJ

Interviews conducted with:
Agency Contract Administrator

Texas Department of Criminal Justice Administrative Directive 02.46, Entities Contracting with TDCJ states the TDCJ enters into written contracts with private businesses as well as interagency and interlocal agreements and memorandums of understanding with various governmental entities to provide services to or for the benefit of the TDCJ. All agreements must require employees, consultants, independent contractors, agents, and volunteers of such entities to comply with certain TDCJ policies, procedures, regulations, and posted rules that the TDCJ determines are applicable to the services to be performed by such personnel. Such agreements must specify guidelines for the relationship between personnel of the entities and the Warden or Department Head for the unit or department where the personnel are present. All agreements must be reviewed upon renewal of the agreement and updated as needed.
During the pre-on-site phase of the audit, the Auditor conducted an interview with the Agency Contract Administrator regarding how contracts are monitored to determine if the contractor complies with the PREA requirements of the contract. The Agency Contract Administrator informed the Auditor the Texas Department of Criminal Justice currently has 37 contracts for the confinement of inmates. The Agency Contract Administrator explained that all TDCJ contracts include verbiage related to the vendor’s obligation to comply with the PREA Standards prior to entering into agreement with the agency. If the entity is not PREA compliant, the contract will not be executed. Additionally, the Agency Contract Administrator informed the Auditor that the TDCJ has a contract monitor for each secure facility who are responsible for ensuring compliance to the standards by the contracted facility is maintained.

Upon review of the policy and upon completion of the interview with the Agency Contract Administrator, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

**Standard 115.13: Supervision and monitoring**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the
staffing plan take into consideration: All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated)? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? ☒ Yes ☐ No ☐ NA

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? ☒ Yes ☐ No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) ☒ Yes ☐ No ☐ NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? ☒ Yes ☐ No

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility’s deployment of video monitoring systems and other monitoring technologies? ☒ Yes ☐ No

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? ☒ Yes ☐ No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes ☐ No
- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No

- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

**Documents:**

Texas Department of Criminal Justice Operations Manual 06.01, *Safe Prisons/PREA Plan*

Texas Department of Criminal Justice Havins Unit 2020 Staffing Plan Reports

Texas Department of Criminal Justice Havins Unit Deviations from Staffing Plan

Facility Blueprint

Facility Housing Logs (all shifts)

**Interviews conducted with:**

Warden or Designee

PREA Coordinator

PREA Compliance Manager

Intermediate or Higher Level Facility Staff

**On-site Review Observations:**

Daily operational functions

Staff interaction with inmates
Inmate movement
Supervisory staff conducting rounds

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the TDCJ shall ensure each unit develops, documents, and complies with a staffing plan that provides adequate staffing levels, and where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, units shall take into consideration TDCJ policies and procedures, and:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any inadequacy from internal or external oversight bodies;
- Any findings of inadequacy from Federal investigative agencies;
- All the components of the facility’s physical layout (including blind spots);
- Composition of inmate population;
- Number of and placement of supervisory staff;
- Institution programs specific to each shift;
- All applicable State or local laws;
- Prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- Any other relevant factors.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states in circumstances where the staffing plan is not complied with, the unit shall document and justify all deviations from the plan. Each unit the TDCJ operates shall complete an assessment, whenever necessary, but no less frequently than once each year in consultation with the CID Director, who serves as the PREA Coordinator, and the TDCJ Safe Prison PREA Manager (SPPM), to determine an document if the following require adjustments:

- The staffing plan established pursuant to procedures outlined;
- The unit’s deployment of video monitoring systems and other monitoring technologies; or
- Resources the unit has available to commit to ensure adherence to the staffing plan.

During the pre-on-site phase of the audit, the Auditor reviewed three years of the Texas Department of Criminal Justice Havins Unit Annual Staffing Plans (2018, 2019, & 2020). The Havins Unit Annual Staffing Plan provided a detailed review of each facility’s turnout rosters as well as addressing the required considerations outlined in the agency policy and the provision of the PREA standard.
During the pre-on-site phase of the audit, the Auditor reviewed documentation of the deviations from the staffing plan that occurred in the 12 months prior to the on-site visit. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the deviations from the staffing plan. The Facility Warden confirmed that all instances of non-compliance with the staffing plan are documented on the Shift Turnout Roster with a notification to the Regional Director.

The average daily number of inmates on which the facility-staffing plan was predicated on was 596 Facility Security Level G1 – G2 / Custody Level Minimum custody inmates. The most common reasons for deviation from the staffing plan in the last 12 months was due to transport, constant direct observation, and hospital security.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding the Havins Unit Staffing Plan. The Facility Warden discussed how Security Operations develops each units staffing levels based on each units design, mission, inmate population, and custody level. The Facility Warden confirmed Security Operations provides Havins Unit facility with shift turnout rosters of all positions identified in the staffing plans. The Facility Warden confirmed when developing a shift turnout roster, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the inmate population, the prevalence of substantiated and unsubstantiated allegations of sexual abuse, inmate-on-inmate assaults, and uses of force. Additionally, the Facility Warden confirmed that video monitoring is also taken into consideration. To ensure compliance with the staffing plan, Facility Warden and Supervisory Staff conduct rounds on the compound for visual verification of staff assignments throughout the compound.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager from Havins Unit and confirmed the process of developing a staffing plan previously described by the Facility Warden. The PREA Compliance Manager also confirmed that an assessment of the facility-staffing plan is conducted annually and each are consulted regarding any adjustments to the staffing plan.

During the on-site phase, the auditor reviewed the average daily number of inmates’ report, staff shift rosters, facility blueprint, and daily inmate activity schedules to verify adequate staff coverage in comparison to inmate population, inmate movement, and facility size and layout.
Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states Security Supervisors at each unit shall conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment. These rounds shall be conducted during all shifts in accordance with applicable Post Orders.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states staff is prohibited from alerting other staff members when these round are occurring, unless the announcement is related to the legitimate operational functions of the unit. Violations shall be handled in accordance with Executive Directive PD-22, *General Rules of Conduct and Disciplinary Action Guidelines for Employees*.

During the on-site phase of the audit, the Auditor reviewed twenty-four housing logs documenting supervisor unannounced rounds and verified the unannounced rounds are being conducted and documented in accordance to agency policy and the PREA Standard. The sample of housing logs reviewed covered several days in various months, and were from every shift. In the samples reviewed, the Auditor did not find any consistent patterns or inadequacies.

During the on-site phase of the audit, the Auditor conducted supervisory level staff interviews and inquired how unannounced rounds are completed without staff knowledge. Supervisory level staff indicated this is completed by observing staff movement, monitoring radio transmissions, alternating movement patterns or being unpredictable with times or walking pattern, and listening to staff conversations while conducting rounds throughout the facility.

During the on-site phase of the audit, the Auditor toured the facility and observed the daily operational functions, staff interacting with inmates, general inmate movement, inmates out at recreation, inmates participating in programs, inmates completing job assignments, and supervisory staff conducting rounds. These observations provided additional verification of policy and of standard compliance.

Upon review of the policies and documentation provided and upon completion of interviews conducted with the Facility Warden, PREA Ombudsman, PREA Compliance Manager, and Intermediate or Upper-level Supervisory Staff during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)  ▪ Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)  ▪ In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)  ▪ In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)  ▪ Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)  ▪ Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)  ▪ Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does
not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Unit Classification Procedure 4.19, *Youthful Offenders*

Interviews conducted with:
Facility Warden
PREA Compliance Manager

Texas Department of Criminal Justice Unit Classification Procedure 4.19, *Youthful Offenders* designates specific TDCJ facilities to house youthful inmates.

Havins Unit is not designated as a youthful inmate facility. This was verified during interviews with the Facility Warden, PREA Compliance Manager, and Classification Staff.

Upon review of the policy and upon completion of the interviews with facility staff, the Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
  - Yes ☒
  - No ☐

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
  - Yes ☐
  - No ☒
  - NA ☒
• Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) ☐ Yes ☐ No ☒ NA

115.15 (c)

• Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No

• Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) ☐ Yes ☐ No ☒ NA

115.15 (d)

• Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

• Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

• Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

• Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate’s genital status? ☒ Yes ☐ No

• If an inmate’s genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

• Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No

• Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No
Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Operations Manual 06.01, *Safe Prisons/PREA Plan*
Texas Department of Criminal Justice Safe Prisons PREA Operations Manual 02.05, *Cross-Gender Searches & Log*
Texas Department of Criminal Justice Administrative Directive 03.22, *Offender Searches*
Texas Department of Criminal Justice Security Memorandum 02.25, *On-the-Job Training Program*
Texas Department of Criminal Justice OJT Program Procedures Guide
Texas Department of Criminal Justice *Safe Prisons/PREA Program In-Service Training Curriculum / Records*

Interviews conducted with:
Random sample of Inmates
Transgender/Intersex Inmates

On-site Review Observations:
Daily operational functions
Staff interaction with inmates
Inmate movement

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states staff shall not conduct cross-gender strip searches or cross-gender visual body cavity searches, such as a search of the anal or genial opening, except in
exigent circumstances or when performed by medical practitioners in accordance with Administrative Directive 03.22, *Offender Searches*.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* and Administrative Directive 03.22, *Offender Searches* outline the documentation procedures required in exigent circumstances or when performed by medical practitioners.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states correctional officers shall make best efforts to allow inmates to shower, perform bodily functions, and change clothing without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite gender shall announce their presence when entering an inmate housing area in accordance with applicable Post Orders. Under no circumstances shall an offender search be conducted solely for the purpose of determining an inmate’s genital status.

Documentation provided by the facility indicated there were no cross-gender strip searches or cross-gender visual body cavity searches conducted during the last 12 months. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and the PREA Compliance Manager and verified that no cross-gender strip searches or cross-gender visual body cavity searches were conducted.

During the pre-on-site phase of the audit, the Auditor reviewed the provided documentation to include shift turnout rosters, shift assignments, and daily inmate activity schedule. During the on-site phase of the audit, the Auditor compared the information reviewed with her observations made during the facility tour and noted the number of male staff members is more than adequate and covers all shifts.

During the on-site phase of the audit, the Auditor observed the facility operations throughout the day, to include continuous inmate movement throughout the facility, continuous physical interactions between staff and inmates, inmates participating in-group activities, and inmates performing job assignments throughout the facility and within the compound grounds. The Auditor also observed opposite gender announcements being conducted throughout the facility tour.

During the on-site phase of the audit, the Auditor requested interviews with a random selection of inmates. Twenty-eight random sample of inmate interviews were completed and all twenty-eight inmates confirmed they
have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, twenty-six of the twenty-eight inmates interviewed confirmed staff of the opposite gender announce his presence prior to entering the housing unit.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states during the intake process, non-medical staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the genital status is unknown, it may be determined during conversation with the inmate, by reviewing medical records, or if necessary, as part of a broader medical examination conducted in private by a medical practitioner.

During the pre-on-site phase of the audit, the Auditor reviewed documentation provided by the facility showed the facility has had zero searches of a transgender or intersex for the sole purpose of determining the inmate’s genital status.

During the on-site phase of the audit, the Auditor requested an inmate roster for transgender or intersex inmates to conduct targeted interviews. At the time of the on-site phase of the audit, the facility provided documentation showing no transgender or intersex inmates were in custody. Therefore, inmates in this targeted category were not interviewed.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states correctional staff shall be trained in the methods of conducting cross-gender, transgender, and intersex offender pat-down searches in order to ensure the searches are conducted professionally and respectfully, in the least intrusive manner possible, but with attention to security needs. The training shall be tailored to the gender of the inmates at the unit of assignment. The employee shall receive additional training when transferring to a unit with offenders of a different gender.

During the on-site phase of the audit, the Auditor reviewed the training records and training curriculum provided to staff members who may have contact with inmates, how to perform cross-gender pat-down searches and searches of transgender and intersex inmates. Training records indicated staff members receive training on the agency’s PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined the agency’s policy on cross-gender pat-down searches and searches of transgender and intersex inmates, policy prohibiting search of inmates for the sole purpose of determining the inmate’s genital status, defining exigent circumstances, and conducting searches in a professional and respectful manner.
Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during specialized staff interviews conducted during the on-site phase, Havins Unit demonstrated facility-wide practices that are consistent with policy and with the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if “other,” please explain in overall determination notes)? ☒ Yes ☐ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under §115.64, or the investigation of the inmate’s allegations? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*
Documents:
Texas Department of Criminal Justice Operations Manual 06.01, Safe Prisons/PREA Plan
Texas Department of Criminal Justice Administrative Directive 06.25, Qualified Interpreter Services - ASL
Correctional Managed Health Care Policy Manual G.51.1, Offenders with Special Needs
Texas Department of Criminal Justice Staff Translator List
Texas Department of Criminal Justice Correctional Institutions Division Intake Procedures
Texas Board of Criminal Justice, PREA Ombudsman Office brochure (multiple languages)

Interviews conducted with:
Facility Warden
Inmates with Disabilities or LEP
Random sample of Staff

On-site Review Observations:
PREA informational signage posted in multiple languages

Texas Department of Criminal Justice Safe Prisons/PREA Plan states appropriate steps shall be taken to ensure inmates with disabilities, including inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspect of TDCJ efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states staff shall provide access to qualified interpreters, when necessary, to ensure effective communication with inmates who are deaf or hard of hearing. Written materials shall be provided in accordance with TDCJ policies and procedures, to ensure effective communication with inmates with disabilities, limited reading skills, or who are blind or have low vision.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates with limited English proficiency shall be provided meaningful access to information regarding TDCJ efforts to prevent, detect, and respond to sexual
abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states when seeking interpreters, staff shall not rely on inmate interpreters, readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties, or the investigation of the allegations. Staff shall follow appropriate TDCJ policies and procedures for obtaining a qualified interpreter.

Texas Department of Criminal Justice Administrative Directive 06.25, Qualified Interpreter Services – ASL and the TDCJ Safe Prisons/PREA Plan outline procedures for acquiring a qualified interpreter for inmates requiring such services.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager regarding how the facility takes appropriate steps to ensure that all inmates have an equal opportunity to participate in the facility’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The PREA Compliance Manager detailed the efforts made by the facility to ensure impaired inmates are provided opportunities and benefits equal to those of unimpaired inmates. Inmates with either disabilities or LEP inmates are provided with alternatives to accommodate participation in the SAFE Prisons PREA program such as videos and brochures tailored to their primary language.

Additionally, every effort is made to provide all training in a format that will be easily understood by inmates who have a physical or developmental impairment or who have limited English proficiency. The Texas Department of Criminal Justice maintains a list of translators for every institution and this list is utilized for assisting with translation.

During the pre-on-site phase of the audit, the Auditor reviewed the Texas Department of Criminal Justice staff translator list. The Staff Translator list provides the staff member’s name, contact number, language translation ability, and facility assignment. The various language translation abilities of TDCJ staff include Afrikaans, Arabic, Akan, Chinese, Creole, Dutch, French, German, Hindi, Italian, Igbo, Korean, Laos, Latin, Mandarin, Persian, Pilipino, Portuguese, Romanian, Russian, Spanish, Swedish, Swahili, Tagalog, Thai, Twi, Ukrainian, Urdu, Yoruba, and American Sign Language.
During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff. Each staff member confirmed the agency policy prohibiting the use of an inmate to provide translation services; all staff members acknowledged the use of either the language line (interpreter services) or contacting another staff member to translate.

During the on-site visit, the Auditor interviewed three targeted inmates with physical or cognitive disabilities, LEP, or hearing or vision impaired. Each inmate acknowledged receiving PREA information during the intake / transfer process. Each inmate described receiving the comprehensive PREA orientation within the first few days after arriving to the facility. Additionally, all three inmates acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations throughout the compound. These PREA bulletins are posted in multiple languages, located near the phones banks inside the dormitory’s, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display how to avoid sexual abuse and sexual harassment, definitions for sexual abuse and sexual harassment, and the multiple methods of reporting. The bulletins also provide the phone numbers and addresses for a confidential and private report to the PREA Ombudsman Office, which is also the designated outside reporting entity for inmates at Havins Unit.

Upon review of the policies, TDCJ inmate intake procedures, and upon completion of the targeted interviews with inmates, and the informal interviews with facility staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.17: Hiring and promotion decisions**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes ☒ No ☐

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes ☒ No ☐

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes ☒ No ☐

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes ☒ No ☐

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes ☒ No ☐

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? Yes ☒ No ☐

- Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? Yes ☒ No ☐

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes ☒ No ☐

- Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes ☒ No ☐

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes ☒ No ☐

115.17 (e)
• Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)

• Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No

• Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No

• Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

• Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

• Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.
Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states the TDCJ shall not hire or promote anyone, who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who previously:

- Has engaged in sexual abuse in a prion, jail, lockup, community confinement, juvenile facility, or other institution, as defined in 42 USC 1997;
- Has been convicted of engaging or attempting to engage in sexual activity in the community that was facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent, refused, or was unable to consent or refuse; or
- Has been civilly or administratively adjudicated to have engaged in the activity.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states the TDCJ shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states the TDCJ shall directly ask all applicants and employees who may have contact with offender about previous misconduct in written applications or interviews for hiring or promotions. The TDCJ shall also impose on employees a continuing affirmative duty to disclose knowledge of any such misconduct. Material omissions regarding misconduct of this nature, or the provision of materially false information, shall be grounds for termination.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states before hiring new employees who may have contact with inmates, the TDCJ shall perform a criminal background check and attempt to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse, in accordance with Federal, State, and local law.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states a criminal background check shall be performed before enlisting the services of any contractor who may have contact with offenders.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states criminal background checks shall either be conducted at least every five years for current employees and contractors who may have contact with inmates, or a system shall be in place to otherwise attain the information for current employees.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states unless prohibited by law, information shall be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee after receiving a request from an institutional employer for whom the employee has applied to work.

Texas Department of Criminal Justice Executive Directive PD-73, Selection Criteria for Correctional Officer Applicants states the TDCJ promotes equal employment opportunity through a correctional officer selection system designed to achieve employment without regard to race, color, religion, sex (gender), national origin, age, disability, or genetic information.

Texas Department of Criminal Justice performs all criminal history checks through the Criminal Justice Information System (CJIS). TDCJ access is provided through the Texas Department of Public Safety (DPS). Once an employee or contractor is entered into the system, DPS provides an automatic notification by email of any subsequent activity on the individual’s criminal history. The Department of Public Safety sends an electronic report to the TDCJ Human Resources Headquarters criminal history staff on a monthly basis. DPS provides a report each month for employees with active warrants. However, if an employee is arrested the agency will receive an automatic notification via CJIS. The agency receives these notifications on a daily basis.

During the on-site phase of the audit, the Auditor conducted an interview with the agency’s Administrative/Human Resources personnel who confirmed the agency conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a
contractor or volunteer and at least once every five years. The HR Staff Member confirmed the TDCJ requirement imposed upon all employees to disclose any previous misconduct and the agency’s requirement to provide information regarding a former employee upon request of another institution or agency. In addition to using the Criminal Justice Information System (CJIS), the HR Staff Member confirmed the TDCJ access is provided through the Texas Department of Public Safety (DPS).

Havins Unit reported, in the 12 months prior to the audit, twenty-two criminal background checks were performed of persons hired or promoted who may have contact with inmates. During the on-site visit, the Auditor reviewed twelve personnel files of new hires, employees with tenure, employees recently promoted, and those with specialized training. Each file contained the required documentation to include thorough background investigations, which were completed as required and in accordance to Texas Department of Criminal Justice policies and procedures.

Upon review of the policies and review of personnel files and upon completion of the interview conducted with the Human Resources Staff, the Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.18: Upgrades to facilities and technologies**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
  - □ Yes  □ No  ☒ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
  - □ Yes  □ No  ☒ NA
Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Documents:

Texas Department of Criminal Justice Security Operations Manual 07.02, Security Surveillance Systems

Interviews conducted with:

Agency Head
Facility Warden

Texas Department of Criminal Justice Security Operations Manual 07.02, Security Surveillance Systems outlines the agency’s procedures for conducting annual reviews of video monitoring systems and the installation of new video surveillance equipment to ensure adequate coverage is provided to protect inmates from sexual abuse.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility effects the ability to protect inmates from sexual abuse. The Agency Head explained how facility modification has always been focused on providing safety to both staff and inmates. Modifications or expansions that are not in the best interest of the facility or department are not given consideration.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden. During the interview, the Facility Warden confirmed that prior to designing or acquiring any new facility or when planning
any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect inmates from sexual abuse. The Facility Warden also confirmed that prior to the installation of the additional cameras the facility shall considered how the addition of such technology would enhance the agency's ability to protect inmates from sexual abuse. The Facility Warden confirmed to the Auditor that Havins Unit has not undergone modifications or expansions to the facility since the last audit.

Upon review of the policy and upon completion of the interviews conducted with the Agency Head and the Facility Warden, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (c)
Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate? ☒ Yes ☐ No

Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No

If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ☒ Yes ☐ No

Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No

If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.) ☒ Yes ☐ No ☐ NA

Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? ☒ Yes ☐ No

As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No

If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

Auditor is not required to audit this provision.

If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness
to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Operations Manual 06.01, Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 05.01, Sexual Abuse Response, & Investigation
Texas Department of Criminal Justice Office of Inspector General 04.05, Offender Sexual Assault Investigations
Correctional Managed Health Care Policy Manual G-57.1, Sexual Assault / Sexual Abuse
Texas Department of Criminal Justice MOU with the ARK Domestic Violence + Sexual Assault Shelter
SANEs / SAFE Uniform Evidence Protocol

Interviews conducted with:
Random sample of Staff
PREA Compliance Manager

On-site Review Observations:
Sexual Abuse / Harassment Informational Posters
Inmate phones located in each dormitory
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 05.01, Sexual Abuse Response, & Investigation and TDCJ SAFE Prisons/PREA Plan outlines the procedures, notification process, and the coordinated response to an allegation of sexual abuse. Coordinated response includes the role and responsibilities of First Responders, Unit Security Staff, the Office of the Inspector General (OIG), Medical and Mental Health, and Victim Advocate.

The Auditor established, from a thorough review of TDCJ policy, that inspectors assigned to the Office of the Inspector General’s office follow the United States Department of Justice, A National Protocol for Sexual Assault Medical Forensic Examinations a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator assigned to the Office of the Inspector General’s office who confirmed the responsibilities of an investigator, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services. Attempts shall be made to make a victim advocate from a rape crisis center available to the inmate victim first, however if one is not available, the unit shall make a qualified staff member from a community-based organization or a qualified TDCJ staff member available. The victim advocate or qualified TDCJ staff member, or qualified community-based organization staff member shall:

- Accompany and support the victim through the forensic medical examination process and investigatory interviews;
- Provide emotional support, crisis intervention, information, and referrals; and
- Not delay or otherwise impede the screening or stabilization of an emergency medical condition.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all inmate victims of sexual abuse shall be offered access to forensic medical examinations, whether on-site or at an outside medical facility, without financial cost, where evidentiary or medically appropriate. Such examination shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) when possible. If neither SAFE nor
SANE can be made available, the examination may be performed by other qualified medical practitioners in accordance with CMHC policies. Efforts to provide a SAFE or SANE shall be documented. Inmate victims of sexual abuse who require a forensic exam shall be taken to the nearest hospital emergency room for completion of a forensic exam. The Auditor reviewed Texas Senate Bill (SB-1191) which requires health care facilities to be equipped to conduct medical forensic exams for sexual abuse victims. Senate Bill 1191 also requires hospitals not designated a forensic exam facility are required to train personnel in the basic sexual assault forensic evidence collection.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator from the Office of Inspector General. The OIG Investigator explained the processes and procedures (Coordinated Response Plan) and confirmed the OIG Investigator authorizes the forensic examination and the victim of the sexual abuse would be taken to the nearest hospital (Hendrick Medical Center Brownwood) emergency room for completion of the forensic exam.

During the on-site phase of the audit, the Auditor contacted the Hendrick Medical Center Brownwood and confirmed such services are provided and that no forensic examination had been conducted within the past 12 months for the Havins Unit.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol shall be developmentally appropriate for youth, where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice Office on Violence against Women publication, A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents, or similarly comprehensive and authoritative protocols developed after 2011.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, Office of Attorney General (OAG) Law Enforcement Request for Sexual Assault Exam form, and the Memorandum of Understanding (MOU) between TDCJ and the ARK Domestic Violence + Sexual Assault Shelter.
The ARK Domestic Violence + Sexual Assault Shelter is located in Brownwood Texas. The ARK provides safe shelter and comprehensive resident and non-resident services through advocacy, referrals, and education to support and empower victims of domestic violence and sexual assault.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the ARK. The victim advocate confirmed the existing MOU and the services provided to inmates at the TDCJ Havins Unit. The services provided to the inmates at Havins Unit include accompanying and providing emotional support services, crisis intervention, information, and referrals to the inmate survivor during forensic medical examinations. Additional services include accompany and support the inmate during investigatory interviews upon request of the inmate, provide follow-up face-to-face emotional support services advocate upon request, receive and conduct private and confidential phone calls with inmates which allows in-depth counseling with an advocate/counselor and immediate crisis intervention, and provide sexual abuse educational information upon written request from inmates.

During the on-site phase of the audit, the Auditor interviewed a random sample of staff regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency’s response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

Havins Unit reported no forensic medical exams were conducted during the past 12 months. During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the Facility Warden who confirmed the information is correct.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.
Upon review of the policies, contracts with outside entities, the SANEs/SAFEs Uniform Evidence Protocol, and observations made during the facility tour, and upon completion of interviews conducted prior to and during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

### 115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No
- Does the agency document all such referrals? ☒ Yes ☐ No

### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a.).) ☒ Yes ☐ No ☐ NA

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 05.01, Sexual Abuse Response, & Investigation
Texas Department of Criminal Justice Administrative Directive 16.20, Reporting Incidents/Crimes to Office of Inspector General
Texas Department of Criminal Justice Board Policy 01.07, Inspector General
Office of the Inspector General Investigator Training, Credentials
Texas Department of Criminal Justice Agency Website

Interviews conducted with:
Agency Head
Investigative Staff

Texas Department of Criminal Justice Administrative Directive 16.20, Reporting Incidents/Crimes to Office of Inspector General outlines the legal authority and jurisdiction of the OIG as the primary investigating law enforcement agency for the TDCJ and criminal offenses on TDCJ property. In accordance with Texas Government Code § 493.019, the Office of the Inspector General (OIG) is the primary investigative and law enforcement entity of the TBCJ. The OIG reports directly and only to the Texas Board of Criminal Justice.

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 05.01, Sexual Abuse Response, & Investigation and TDCJ Safe Prisons/PREA Plan outlines the procedures, notification process, and the coordinated response to an allegation of sexual abuse. Coordinated response includes the role and
responsibilities of First Responders, Unit Security Staff, the Office of the Inspector General (OIG), Medical and Mental Health, and Victim Advocate.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or sexual harassment. The Agency Head explained TDCJ supervisors and managers are responsible for conducting administrative investigations and the Office of the Inspector General oversees and coordinates the process for all criminal investigations involving inmates or staff members.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator assigned to the Office of the Inspector General’s office who confirmed the responsibilities of an investigator, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Investigator confirmed attending and successfully completing the specialized training curriculum developed by the Office of the Inspector General.

The Inspector also confirmed agency policy requiring all criminal allegations of sexual abuse must be referred to the Office of the Inspector General. Additionally, the Inspector confirmed all OIG Investigators are certified peace officers, as authorized by Texas Code of Criminal Procedures, Article 2.12 and licensed by the Texas Commission on Law Enforcement (TCOLE).

Texas Department of Criminal Justice publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the agency website

http://www.tdcj.texas.gov/tbcj/prea.html

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator from the Office of Inspector General and requested to the Investigator to provide an overview of the investigative process and the
documentation required in a case when an allegation of sexual abuse or sexual harassment incident occurs within the facility. The Investigator explained upon receiving notification of a sexual assault incident, the investigation is initiated promptly and is completed thoroughly and objectively by a qualified investigator from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations. The Investigator explained the initial process includes conducting scene investigation, collecting evidence (biological or trace), photographs, interview staff, witnesses, review unit documentation pertaining to the investigation, and interviewing the victim – depending on emotional and physical state.

The Investigator also provided an overview of the various documents contained in each case file to include but not limited to the initial incident reports, notifications, medical and mental health forms, inmate rosters, advocacy information, witness statements, victim and alleged aggressor statements, investigative report, Office of the Inspector General Inquiry Report, notification of case disposition to inmate (offender acknowledgement), 90-day monitoring, / status check history, and the Required Procedures Log.

Upon review of the policies, documentation, and upon completion of the interviews conducted during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**TRAINING AND EDUCATION**

**Standard 115.31: Employee training**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.31 (a)**

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment ☒ Yes ☐ No
Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  ☒ Yes  ☐ No

Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  ☒ Yes  ☐ No

115.31 (b)

Is such training tailored to the gender of the inmates at the employee’s facility?  ☒ Yes  ☐ No

Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  ☒ Yes  ☐ No

115.31 (c)

Have all current employees who may have contact with inmates received such training?  ☒ Yes  ☐ No

Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency’s current sexual abuse and sexual harassment policies and procedures?  ☒ Yes  ☐ No

In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  ☒ Yes  ☐ No

115.31 (d)

Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  ☒ Yes  ☐ No

Auditor Overall Compliance Determination


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Facility Name – Thomas R Havins Unit
Exceeds Standard *(Substantially exceeds requirement of standards)*

Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.01 *PREA Awareness Training*
Texas Department of Criminal Justice Executive Directive PD-29, *Sexual Misconduct with Offenders*
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons PREA Training Curriculum (Staff)
Texas Department of Criminal Justice Havins Unit Training Roster / Staff Signatures

Interviews conducted with:
Random sample of Staff

On-site Review Observations:
Personnel Training Records

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.01 *PREA Awareness Training* and the TDCJ Safe Prisons/PREA Plan outlines the responsibilities of the PREA Compliance Manager as it relates to the training program for all unit staff. The agency has a comprehensive training program, which includes the agency’s zero-tolerance policy and the prevention, detection, reporting and response to sexual abuse and sexual harassment allegations.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states all Safe Prisons/PREA Program training and education shall be performed in accordance with the Correctional Training and Staff Development program. All employees who may have contact with inmates shall receive the following in accordance with Safe Prisons/PREA requirements:

- TDCJ’s zero tolerance for sexual abuse and sexual harassment;
- Methods for fulfilling responsibilities under the TDCJ sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- Inmates’ rights to be free from sexual abuse and sexual harassment;
- The right of inmates & staff to be free from retaliation for reporting sexual abuse and sexual harassment;
- Characteristics of sexual abuse and sexual harassment in confinement settings;
- Common reactions of sexual abuse and sexual harassment victims;
- How to detect and respond to signs of threatened & actual sexual abuse and sexual harassment;
- How to avoid inappropriate relationships with inmates;
- Communicating effectively & professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates;
- How to comply with relevant laws related to mandatory reporting of sexual abuse;
- Common characteristics of victims and predators sometimes referred to as red flags.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the training shall be tailored to the gender of the inmates at the unit of assignment. The employee shall receive additional training when transferring to a unit with inmates of a different gender.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all employees who have contact with inmates, including medical and mental health care practitioners, shall receive training at least every two years. In the interim years, employees shall be provided refresher information on current sexual abuse and sexual harassment policies. All training shall be documented through employee signature or electronic verification, confirming that employees understand the training and information they received.
During the pre-on-site phase of the audit, the Auditor reviewed training curriculum and documentation of staff signatures verifying training comprehension and attendance. The training curriculum outlined the staff member’s responsibilities in preventing, detecting, and response to inmate sexual abuse and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with inmates, understanding that inmates have the right to be free from sexual abuse and sexual harassment.

The Texas Department of Criminal Justice PREA training curriculum provided to the Auditor, titled Safe Prisons/PREA, includes an inmate’s right to be free from sexual abuse and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce “opposite gender” correctional officers and supervision staff into an all-male or all-female housing unit and how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner consistent with security correctional environments.

The training curriculum was extremely detailed with discussions of the required PREA standards, instruction videos, and group discussion scenarios. During the on-site phase of the audit, the Auditor reviewed additional training records that also verified receipt of the required PREA training and included certificates for specialized training.

During the on-site phase of the audit, the Auditor conducted random staff interviews. Each staff member interviewed articulated the agency’s zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. All staff members acknowledged receiving the training every year during his/her In-service training.

Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the files reviewed during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders
Interviews conducted with:
Volunteer or Contractor who have contact with Inmates

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all contractors and volunteers who have contact with inmates shall be trained regarding sexual abuse and sexual harassment prevention, detection, and response policies and procedures in accordance with the TDCJ Volunteer Services Plan PD-29, *Sexual Misconduct with Offenders*.

Texas Department of Criminal Justice Executive Directive PD-29, *Sexual Misconduct with Offenders* states the TDCJ has zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of inmates. An employee is prohibited from subjecting another employee, inmate, or other individual to harassment or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with inmates.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the level and type of training provided to volunteers and contractors shall be specific to the services provided and the level of contact with inmates; however, all volunteers and contractors who have contact with inmates shall be notified of the TDCJ’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures for reporting incidents.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states training documentation confirming the volunteers and contractors have received and understand the training shall be maintained in accordance with TDCJ Records Retention Schedule.

During the pre-on-site phase, the Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training was tailored based on the services they provide and the level of contact they have with
inmates and included the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment along with how to report such incidents.

During the on-site visit, the Auditor conducted interviews with two contract staff members; both staff members confirmed and acknowledge understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities.

Upon review of the policy and documentation and after completion of interviews conducted during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.33: Inmate education**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.33 (a)**

- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No

- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

**115.33 (b)**

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? ☒ Yes ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? ☒ Yes ☐ No

**115.33 (c)**

- Have all inmates received the comprehensive education referenced in 115.33(b)? ☒ Yes ☐ No
• Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility?
  ☒ Yes ☐ No

115.33 (d)

• Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No
• Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No
• Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No
• Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No
• Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

• Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No

115.33 (f)

• In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.02 Offender Sexual Abuse Awareness Training

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Texas Department of Criminal Justice Intake Procedures 1.10, Initial Orientation

Texas Department of Criminal Justice Inmate Orientation Handbook (multiple languages)

Texas Department of Criminal Justice Acknowledgement of Receipt of PREA Orientation

PREA / Sexual Awareness Brochures (multiple languages)

Interviews conducted with:

PREA Compliance Manager
Intake Staff
Random Sample of Inmates
Targeted Inmates (Limited English Proficient, Deaf, or Disabled)

On-site Review Observations:

Inmate files – Comprehensive PREA Education documentation
PREA Informational Signage posted throughout facility
PREA / Sexual Awareness video

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.02 Offender Sexual Abuse Awareness Training and the Safe Prisons/PREA Plan outline the procedures requiring all inmates receive comprehensive education on sexual abuse and sexual harassment, agency zero tolerance, and methods to report such incidents.

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.02 Offender Sexual Abuse Awareness Training and the Safe Prisons/PREA Plan outlines the responsibility of the Unit Safe Prisons/PREA Compliance Manager to ensure all inmates at Havins Unit are provided education on sexual abuse and sexual harassment. Unit Safe Prisons/PREA Compliance Manager shall maintain documentation of inmate participation on file and in accordance with TDCJ policy. The policy also outlines provisions to provide PREA education in formats accessible for all inmates.
During the pre-on-site phase of the audit, the Auditor reviewed the comprehensive PREA educational video transcript, provided in multiple languages, that is given to all TDCJ inmates within seven days of arriving to a permanent facility. The facilities utilize the TDCJ Safe Prisons/PREA Program educational video titled *Offender Sexual Abuse/PREA Awareness* video. During the on-site phase of the audit, the Auditor also reviewed multiple comprehensive documentation rosters with inmate signatures and acknowledgment of understanding. The facility maintains documentation of inmate participation on the *Individual Treatment Plan*.

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 06.02 *Offender Sexual Abuse Awareness Training* and SAFE Prisons/PREA Plan outline the resources available for inmates with recognized disabilities and Limited English Proficiency (LEP). TDCJ policy outlines resources for inmates with hearing impairment (closed captioning), vision impairment (large print material or reading of material to inmate by staff), or translation for LEP inmates (language line services).

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and discussed the inmate comprehensive PREA orientation and documentation process. The PREA Compliance Manager provided specific details on the process of educating inmates including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process through the Safe Prisons/PREA Program, PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

During the on-site visit, the Auditor interviewed three targeted inmates with physical disabilities, LEP, hearing, or vision impaired. Each inmate acknowledged receiving the initial PREA information upon arrival to the facility. All three inmates described receiving the comprehensive PREA orientation (video) within the first week after arriving to the facility. Additionally, inmates acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins. These PREA bulletins are posted in multiple languages, located near the phones banks inside every dormitory, as well as several informational bulletins were posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display phone numbers and addresses for the victim advocate services and the PREA Ombudsman and are displayed in multiple languages.
During the on-site phase of the audit, the Auditor conducted twenty-eight interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing unit and of various diversities were interviewed. All twenty-eight inmates interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates interviewed acknowledged the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Inmates also referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. Twenty-four of the twenty-eight inmates interviewed referred to notifying a family member or a staff member as the most direct method to report or inquire about PREA information. All inmates interviewed also referred to calling the PREA Ombudsman or a family member as their source outside the facility and all twenty-eight inmates interviewed confirmed knowledge of third party reporting. Twenty-four of the twenty-eight inmates interviewed were aware of the availability of submitting an anonymous PREA report.

Upon review of the policy and documentation listed above and previously discussed, and after completion of staff and inmate interviews conducted during the on-site visit, in addition to the observations made throughout the on-site tour, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

**Standard 115.34: Specialized training: Investigations**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if
the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.) ☒ Yes ☐ No ☐ NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does
not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Board Policy 01.07, Inspector General
Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, Training Procedures
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Specialized Training Curriculum
Training Certificates

Interviews conducted with:
Investigative Staff

On-site Review Observations:
Training files

Texas Department of Criminal Justice Board Policy 01.07, Inspector General and the SAFE Prisons/PREA Plan outlines the legal authority and jurisdiction of the OIG as the primary investigating law enforcement agency for the TDCJ and criminal offenses on TDCJ property. In accordance with Texas Government Code § 493.019, the Office of the Inspector General (OIG) is the primary investigative and law enforcement entity of the TBCJ. The OIG reports directly and only to the Texas Board of Criminal Justice.

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, Training Procedures establishes the requirements for all OIG employees to receive appropriate and relevant job-related training. Documentation and maintaining the agency’s training records is the responsibility of the Training Department.

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, Training Procedures, and the SAFE Prisons/PREA Plan outlines the specialized requirements, which must be obtained in addition to the mandatory state law enforcement training. TDCJ policy requires that OIG investigators shall receive training specific to conducting sexual assault investigations in confinement settings as well as training on the Prison Rape Elimination Act (PREA) standards. TDCJ policy also designates that specialized training shall
include interviewing sexual abuse victims, application of Miranda and Garrity, sexual abuse evidence collection, and the evidence necessary to substantiate a case for prosecution referral.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National Institute of Corrections (NIC), *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an Investigator assigned to the Office of the Inspector General’s office who confirmed her attendance and successful completion of the required specialized training curriculum from the National Institute of Corrections, *Specialized Training: Investigating Sexual Abuse in Correctional Settings*.

The Investigator clearly articulated the comprehensive training she had received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of *Miranda and Garrity* and the importance of each, and criteria required for administrative action and prosecution referrals.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual
abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) ☐ Yes ☐ No ☒ NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) ☒ Yes ☐ No ☐ NA

- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

**Documents:**

Texas Department of Criminal Justice *Safe Prisons/PREA Plan*

Texas Department of Criminal Justice Executive Directive PD-29, *Sexual Misconduct with Offenders*

Correctional Managed Health Care Policy Manual C-25.1, *Training for Health Service Staff*

Texas Department of Criminal Justice Medical & Mental Health Training Curriculum (Safe Prisons/PREA Program and PRC – *PREA Health Care Standards*)

Texas Department of Criminal Justice Training Roster w/signatures (Medical / Mental Health Staff)

**Interviews conducted with:**

Medical / Mental Health Staff

**On-site Review Observations:**

Medical Staff Training Records

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states all contractors and volunteers who have contact with inmates shall be trained regarding sexual abuse and sexual harassment prevention, detection, and response policies and procedures in accordance with the TDCJ Volunteer Services Plan PD-29, *Sexual Misconduct with Offenders*.

Texas Department of Criminal Justice Executive Directive PD-29, *Sexual Misconduct with Offenders* states the TDCJ has zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of inmates. An employee is
prohibit from subjecting another employee, inmate, or other individual to harassment or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with inmates.

During the pre-on-site phase of the audit, the Auditor the Correctional Managed Health Care Policy Manual C-25.1, *Training for Health Service Staff* policy and reviewed training records of all medical staff currently assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required elements of the agency policy and of the PREA standard.

During the on-site phase, the Auditor conducted interviews with two Medical & Mental Health staff members and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. Medical and Mental Health staff members also confirmed receiving the agency’s general PREA training, which included the zero tolerance to sexual abuse and sexual harassment.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted, in addition to the observations made during the on-site visit file review, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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**SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS**

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)
- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
  ☒ Yes ☐ No

### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
  ☒ Yes ☐ No

### 115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate’s criminal history is exclusively nonviolent?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener’s perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability?  ☒ Yes ☐ No
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? ☐ Yes ☒ No

115.41 (e)

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? ☒ Yes ☐ No

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? ☒ Yes ☐ No

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? ☒ Yes ☐ No

115.41 (f)

Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)

Does the facility reassess an inmate’s risk level when warranted due to a referral? ☒ Yes ☐ No

Does the facility reassess an inmate’s risk level when warranted due to a request? ☒ Yes ☐ No

Does the facility reassess an inmate’s risk level when warranted due to an incident of sexual abuse? ☒ Yes ☐ No

Does the facility reassess an inmate’s risk level when warranted due to receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness? ☒ Yes ☐ No

115.41 (h)

Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? ☒ Yes ☐ No

115.41 (i)

Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination
☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice *Safe Prisons/PREA Plan*
Texas Department of Criminal Justice Inmate Risk Assessment

Interviews conducted with:
Staff Responsible for Risk Screening
Random sample of Inmates
PREA Coordinator

On-site Review Observations:
Inmate records of initial assessment & reassessment

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states the intake screening shall include, at a minimum, the following criteria to assess inmates for risk of sexual victimization:

- Any mental, physical, or developmental disability;
- Age of inmate;
- Physical build of inmate;
- Prior incarcerations;
- Whether criminal history is exclusively nonviolent;
- Prior convictions for sex offenses against an adult or child;
- Perception of the inmate as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Previous sexual victimization; and
- Inmate’s own perception of vulnerability.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, known to the TDCJ, in assessing inmates for risk of being sexually abusive.

Texas Department of Criminal Justice Texas Department of Criminal Justice Safe Prisons/PREA Plan states within a period not to exceed 30 days from the inmate’s arrival at an intake facility, the inmate shall be reassessed for risk of victimization or abusiveness following receipt of any additional or relevant information is received by TDCJ. An inmate’s risk level shall be reassessed following a referral, request, and incident of sexual abuse or receipt of any additional information that may affect the inmate's risk of sexual victimization or abusiveness.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states if the results of the screening process indicate that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions asked during the risk screening.

During the on-site phase of the audit, the Auditor reviewed thirty-one 72 Hour Assessment & Special Assessment forms, which were completed during the audit period. All forms were filled out accurately and completely and in accordance to agency policy.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager (Unit Safe Prisons/PREA Manager) regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The PREA Compliance Manager provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.
The Auditor inquired to the PREA Compliance Manager what actions are taken against inmates who refuse to cooperate or answer the questions in the risk screening process. The PREA Compliance Manager responded that inmates are not required to provide answers, if an inmate refuses to answer, another staff member will conduct a follow-up interview. The PREA Compliance Manager confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process. The PREA Compliance Manager also confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities.

During the on-site phase of the audit, the Auditor reviewed inmate records. These records were selected based upon inmates who reported sexual victimization during intake, length at facility, and inmates that disclosed sexual orientation as gay, bisexual, or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the agency policy.

Havins Unit reported eight inmates disclosed prior sexual victimization during the twelve months prior to the audit. During the on-site phase of the audit, the Auditor requested interviews with inmates who disclosed prior sexual victimization. The facility provided the Auditor with documentation showing all eight inmates either were released from custody of the TDCJ or were transferred to another correctional facility and unavailable for an interview.

During the on-site visit, the Auditor conducted twenty-eight interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing unit and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing unit and of various diversities were interviewed. All twenty-eight inmates interviewed recalled the initial risk assessment interview as well as the second risk assessment interview occurring within four to six weeks from the initial assessment.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states staff shall use appropriate controls to disseminate responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information is not exploited to the detriment of any inmate by staff or other inmates. During the on-site phase of the audit, the Auditor inquired to the Safe Prisons/PREA Compliance Manager how the facility protects such
sensitive information. The Classification Officer stated the access to such information is strictly limited to Classification Staff, Safe Prisons Staff, and the Facility Warden.

During the on-site phase of the audit, the Auditor inquired to the PREA Ombudsman how the facility protects sensitive information, in particular an inmate’s risk assessment. The PREA Ombudsman explained how the risk assessments are maintained electronically, in a secure program, and only Classification staff, Safe Prisons Staff, and the Facility Warden have access to the risk assessments.

Upon review of the policies, on-site file and documentation review, and upon completion of the interviews with staff and inmates, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.42 (a)**

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

**115.42 (b)**
Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No

When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No

115.42 (d)

Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No

115.42 (e)

Are each transgender or intersex inmate’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No

115.42 (f)

Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA
Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgment.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 03.01 Offender Assessment Screening

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Texas Department of Criminal Justice Inmate Risk Assessment

Interviews conducted with:

PREA Compliance Manager
Staff Responsible for Risk Screening
Transgender / Intersex Inmates
PREA Ombudsman

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the Unit Classification Committee (UCC) shall use information from the risk-screening document to make housing, bed, work, education, and program assignments with the goal of separating inmates at high risk of being sexually victimized from inmates at high...
risk of being sexually abusive. The committee shall make individualized determinations regarding how to ensure the safety of each offender.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states LGBTI inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of this identification or status, unless the placement is in a dedicated unit wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting these inmates.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states when deciding to assign a transgender or intersex inmates to a unit for male or female inmates, and when making other housing and programming assignments, consideration shall be made on a case-by-case basis with regard to the health and safety of the inmate and potential management or security problems. Housing determinations shall not be made solely on the basis of LGBTI status.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states transgender and intersex inmates will be reassessed semiannually to review any threats to safety experienced by the inmate. A transgender or intersex inmate’s views with respect to his or her own safety will be given serious consideration. Texas Department of Criminal Justice Safe Prisons/PREA Plan states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

During the on-site phase of the audit, the Auditor conducted an interview with PREA Compliance Manager regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The PREA Compliance Manager provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The PREA Compliance Manager explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each inmate, which is done strictly on a case-by-case basis. The PREA Compliance Manager further explained a transgender or intersex inmate's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the inmate or solely based on the inmate's classification level.
During the on-site phase of the audit, the Auditor requested an up-to-date inmate roster for gay, bisexual, transgender, and intersex inmates to conduct targeted inmate interviews. The facility provided the Auditor with documentation showing there were no gay, bisexual, transgender, or intersex inmates in custody at Havins Unit. Throughout the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member and all three confirmed the documentation previously provided to the Auditor. Therefore, inmates in this targeted category were not interviewed.

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Ombudsman and inquired how the agency ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities or wings. The PREA Ombudsman informed the Auditor that agency policy prohibits such placement unless the placement is in a dedicated unit wing established in connection with a consent decree, legal settlement, or legal judgment. The PREA Ombudsman confirmed TDCJ is not under such legal judgment.

Upon review of the policies and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.43: Protective Custody**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.43 (a)**

- Does the facility always refrain from placing 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? ☒ Yes ☐ No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? ☒ Yes ☐ No

**115.43 (b)**

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) ☒ Yes ☐ No ☐ NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) ☒ Yes ☐ No ☐ NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) ☒ Yes ☐ No ☐ NA

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? ☒ Yes ☐ No
- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the basis for the facility’s concern for the inmate’s safety? ☒ Yes ☐ No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

- ☒ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
- ☐ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
□ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Procedure *Safe Prisons/PREA Plan*
Texas Department of Criminal Justice *Protective Safekeeping Plan*
Texas Department of Criminal Justice *Restrictive Housing Plan*

Interviews conducted with:
Facility Warden
Staff who supervise Inmates in Segregated Housing

Texas Department of Criminal Justice Procedure *Safe Prisons/PREA Plan* states inmates at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregated housing while completing the assessment, for no longer than 24 hours.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states if a protective safekeeping housing assignment is made, the unit shall clearly document the basis of the concern for the inmate’s safety and the reason why no alternative means of separation can be arranged.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states inmates placed in protective safekeeping for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the unit restricts access to programs, privileges, education, or work opportunities, the unit shall document the opportunities that have been limited, the duration of the limitations, and the reasons for the limitations. Every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the inmate from the general population.
During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates at high risk of victimization. The Facility Warden explained inmates who are at a high risk of sexual victimization will be placed in protective safekeeping until an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary safekeeping while completing the assessment, for no longer than 24 hours. The incident is reviewed as soon as possible and the inmate will be released from segregation as soon as it can be determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmates placed in safekeeping do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs and education opportunities. The Facility Staff Member explained if an inmate has restrictions placed on her it would be a result of behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.

During the 12 months prior to the audit, the facility reported in the PAQ there were no inmates at risk of sexual victimization being assigned to involuntary segregated housing. Therefore, inmates in this targeted category were not interviewed. During the on-site phase of the audit, the Auditor interviewed the Classification Supervisor and the PREA Compliance Manager and both confirmed the information previously provided by the facility in the PAQ.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.
Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes) ☐ Yes ☐ No ☒ N/A

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)
☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice MOU with the ARK Domestic Violence + Sexual Assault Shelter
Texas Department of Criminal Justice Inmate Orientation Handbook (English/Spanish)
Texas Department of Criminal Justice End the Silence Brochure (English/Spanish)
Texas Department of Criminal Justice PREA Zero Tolerance Poster (English/Spanish)

Interviews conducted with:
PREA Compliance Manager
Random sample of Staff
Random sample of Inmates

On-site Review Observations:
PREA informational signage
TDCJ End the Silence Brochure

Texas Department of Criminal Justice Safe Prisons/PREA Plan states staff shall accept reports made verbally, in writing, anonymously, and from third parties, and shall promptly document any verbal reports.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates shall be provided multiple internal methods to privately report sexual abuse, sexual harassment, and other acts of aggression including but not
limited to, extortion and violence. Inmates may report allegations directly to the Major, the Office of the Inspector General, or the PREA Ombudsman. Reports to the PREA Ombudsman may be made confidentially. Inmates who wish to remain anonymous upon request when reporting allegations of sexual abuse and sexual harassment to the PREA Ombudsman.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates may report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to the incidents.

Texas Department of Criminal Justice Inmate Orientation Handbook states in the event an inmate feels pressured for sexual favor or to violate an institutional rule, the inmate shall refuse to do the prohibited act and either:

- File a formal grievance;
- Contact either a ranking correctional officer, Classification Staff, the Warden, Chaplain, the Office of the Inspector General, or any staff member and request their help; or
- Contact a family member and urge them to call the Ombudsman Office immediately.

During the on-site phase of the audit, the Auditor reviewed the contract between the Texas Department of Criminal Justice and the Memorandum of Understanding (MOU) between TDCJ and the ARK Domestic Violence + Sexual Assault Shelter.

The ARK Domestic Violence + Sexual Assault Shelter is located in Brownwood Texas. The ARK provides safe shelter and comprehensive resident and non-resident services through advocacy, referrals, and education to support and empower victims of domestic violence and sexual assault.

The Auditor reviewed the MOU between TDCJ and the ARK Domestic Violence + Sexual Assault Shelter. The services provided to the inmates at Havins Unit include accompanying and providing emotional support services, crisis intervention, information, and referrals to the inmate survivor during forensic medical examinations. Additional services include accompany and support the inmate during investigatory interviews upon request of the inmate, provide follow-up face-to-face emotional support services advocate upon request, receive and conduct private and confidential phone calls with inmates which allows in-depth counseling with an
advocate/counselor and immediate crisis intervention, and provide sexual abuse educational information upon written request from inmates.

During the on-site phase of the audit, the Auditor conducted twenty-eight interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Twenty-four of the twenty-eight inmates interviewed referred to notifying a family member or a staff member as the most direct method to report or inquire about PREA information. All inmates interviewed also referred to calling the PREA Ombudsman or a family member as their source outside the facility and all twenty-eight inmates interviewed confirmed knowledge of third party reporting. Twenty-four of the twenty-eight inmates interviewed were aware of the availability of submitting an anonymous PREA report. Throughout the inmate interviews, the Auditor noted how several of the inmates referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. This confirmed that inmates are knowledgeable in how to report a PREA incident, as well as how/where to obtain additional PREA information.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states a method shall be provided for staff to privately report sexual abuse and sexual harassment of inmates.

Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders states employees may privately report sexual abuse and sexual harassment of inmates directly to the PREA Ombudsman, a unit OIG investigator, or the OIG Records Management Office.

During the on-site phase of the audit, the Auditor-conducted interviews with a random sample of staff and asked each staff member how an inmate can privately report sexual abuse and sexual harassment or retaliation by other inmates or staff for previously reporting sexual abuse and sexual harassment. Each staff member interviewed was able to articulate the various methods an inmate may privately report an allegation of sexual abuse or sexual harassment (family member, third party reporting, PREA Ombudsman). Staff
members also explained that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

The Auditor inquired to each staff member how he/she would report an allegation of sexual abuse or sexual harassment of inmates privately. Staff responses were evenly divided to either calling the Office of the Inspector General or the PREA Ombudsman. Staff members expressed confidence in reporting either to the OIG or privately to the PREA Ombudsman and no one reported fear of retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager to verify reporting methods for sexual abuse or sexual harassment allegations that are available for inmates and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for inmates and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the PREA Ombudsman office is the designated outside entity for inmate reporting. The Auditor noted during the inmate interviews, several inmates described the PREA reporting process extremely well and twenty-one of the twenty-eight inmates interviewed expressed the availability, comfortability, and confidence in reporting any incident of PREA directly to any staff member.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories, various work assignments, and while touring the programs, educational, and vocational buildings. The Auditor conducted informal interviews with inmates regarding the use of the phones to contact the PREA Ombudsman and all confirmed it is accessible 24 hours a day, 7 days a week and is considered confidential. Throughout the facility tour, the Auditor conducted multiple test calls; all phones tested during the on-site phase of the audit were found to be in working order.

Also throughout the facility tour, the Auditor observed PREA Zero-tolerance informational signage and End the Silence brochures posted in all housing dormitories, inmate educational and program buildings, in the religious programs / services building, and inmate work areas. The PREA informational signage was posted in multiple languages.

Upon review of the policies, contracts, employee handbook, TDCJ inmate handbook, and viewing of the PREA informational brochures and signs and upon completion of interviews conducted, Havins Unit demonstrated
facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

<table>
<thead>
<tr>
<th>Standard 115.52: Exhaustion of administrative remedies</th>
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115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse.  ☒ Yes  ☐ No

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  ☒ Yes  ☐ No  ☐ NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  ☒ Yes  ☐ No  ☐ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  ☒ Yes  ☐ No  ☐ NA

- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  ☒ Yes  ☐ No  ☐ NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  ☒ Yes  ☐ No  ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date
by which a decision will be made? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

### 115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (g)

If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Inmate Orientation Handbook

Interviews conducted with:
Inmates who reported a Sexual Abuse

Texas Department of Criminal Justice Safe Prisons/PREA Plan states an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the compliant and a grievance of this nature shall not be referred to a staff member who is the subject of the compliant.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states a final decision shall be made on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time used by inmates for preparing for an administrative appeal. If the 90-day time period is insufficient to make an appropriate decision, an extension of up to 70 days may be granted. The inmate shall be notified in writing of the extension and a date by which the decision will be made.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states an emergency grievance alleging substantial risk of imminent sexual abuse shall be filed and managed in accordance with the TDCJ Offender Grievance Operations Manual. When receiving an emergency grievance is received, any portion that alleges the substantial risk of imminent sexual abuse shall be forwarded to a level of review for immediate corrective action. An initial response shall be provided within 48 hours of receipt, and a final decision rendered within five calendar days. The initial response and final decision shall document whether the inmate is in substantial risk of imminent sexual abuse and the action taken.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states an inmate may be disciplined for filing a grievance related to alleged sexual abuse only when the investigation determines the inmate filed the grievance in bad faith.

During the pre-on-site phase of the audit, the Auditor reviewed the Texas Department of Criminal Justice Inmate Handbook and confirmed the handbook contains information about the grievance process to include explanation of the two types of grievance, informal and formal. The handbook informs inmates that additional and more detailed grievance information is covered during orientation.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

Upon review of policies, documentation, case files, and of the TDCJ Inmate Handbook, and upon completion of interviews conducted during the on-site visit, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

 Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

 Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) ☐ Yes ☐ No ☒ NA

 Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

 Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

 Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No

 Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 02.03, Postings & Brochures
Texas Department of Criminal Justice Board Policy 03.91, Uniform Offender Correspondence Rules
Texas Department of Criminal Justice MOU with the ARK Domestic Violence + Sexual Assault Shelter
Texas Department of Criminal Justice Inmate Orientation Handbook (English/Spanish)
Texas Department of Criminal Justice End the Silence Brochure (English/Spanish)
Texas Department of Criminal Justice PREA Zero Tolerance Poster (English/Spanish)

Interviews conducted with:
Random sample of Inmates

On-site Review Observations:
PREA informational signage
TDCJ End the Silence Brochure

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates shall be provided access to victim advocates for emotional support services related to sexual abuse by providing mailing address and telephone numbers. The unit shall enable reasonable communication between inmates and these organizations.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates shall be informed, prior to giving them access, of the extent to which these communications will be monitored and the extent of which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states any inmate who alleges sexual abuse or sexual battery will be advised of his/her right to crisis intervention services, forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interviews.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmate victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. Additionally, the victim will be offered support services by means of means of a mailing address and/or telephone numbers to local community support groups.

Texas Department of Criminal Justice Board Policy 03.91, Uniform Offender Correspondence Rules states inmates may send sealed and uninspected letters directly to special and media correspondents. All incoming correspondence from any special or media correspondent shall be opened and inspected only for contraband. The inspection shall be in the inmate’s presence. Special correspondent is any member of the Texas Board of Criminal Justice to include the PREA Ombudsman. The PREA Ombudsman Office is designated as the outside reporting entity for inmates at Havins Unit.

During the pre-on-site phase of the audit, the Auditor reviewed the Texas Department of Criminal Justice Inmate Orientation Handbook. The TDCJ Inmate Handbook provides information regarding victim advocacy services for inmates and all information provided will be kept confidential, except information that requires mandatory reporting.

During the on-site phase of the audit, the Auditor reviewed the MOU with the ARK Domestic Violence + Sexual Assault Shelter.

The ARK Domestic Violence + Sexual Assault Shelter is located in Brownwood Texas. The ARK provides safe shelter and comprehensive resident and non-resident services through advocacy, referrals, and education to support and empower victims of domestic violence and sexual assault.

The Auditor reviewed the MOU between TDCJ and the ARK Domestic Violence + Sexual Assault Shelter and during the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the ARK. The victim advocate confirmed the existing MOU and the services provided to inmates at the TDCJ Havins Unit. The services provided to the inmates at Havins Unit include accompanying and providing emotional support services, crisis intervention, information, and referrals to the inmate survivor during forensic medical
examinations. Additional services include accompany and support the inmate during investigatory interviews upon request of the inmate, provide follow-up face-to-face emotional support services advocate upon request, receive and conduct private and confidential phone calls with inmates which allows in-depth counseling with an advocate/counselor and immediate crisis intervention, and provide sexual abuse educational information upon written request from inmates.

During the on-site phase of the audit, the Auditor conducted twenty-eight interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided. Inmates from every housing dormitory and of various diversities were interviewed.

The Auditor inquired to each inmate interviewed, if needed, are there are services available outside of the facility for dealing with sexual abuse. Twenty-five of the twenty-eight inmates interviewed stated there are services available as they were explained to them during the comprehensive PREA orientation. Twenty-five of the twenty-eight inmates interviewed acknowledged being provided mailing address and telephone numbers to victim advocacy services and that such call is toll-free.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories and in various work assignments, and while touring the programs and educational buildings. Throughout the tour, the Auditor noted PREA informational posters and Sexual Abuse Awareness Brochures displayed in all of the above areas and buildings.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

Upon review of the policies and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Inmate Orientation Handbook (multiple languages)
Texas Department of Criminal Justice Website http://www.tdcj.texas.gov/tbcj/prea.html
Texas Department of Criminal Justice PREA Zero Tolerance Poster (English / Spanish)

Interviews conducted with:
Random sample of Inmates

On-site Review Observations:
PREA informational signage
Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates may report incidents of sexual abuse or sexual harassment by having a family member, friend, or other member of the public submit a third-party grievance.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates shall be provided multiple internal methods to privately report sexual abuse, sexual harassment, and other acts of aggression including but not limited to, extortion and violence. Inmates may report allegations directly to the Major, the Office of the Inspector General, or the PREA Ombudsman. Reports to the PREA Ombudsman may be made confidentially. Inmates who wish to remain anonymous upon request when reporting allegations of sexual abuse and sexual harassment to the PREA Ombudsman.

Texas Department of Criminal Justice publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the agency website http://www.tdcj.texas.gov/tbcj/prea.html

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted. These PREA bulletins are posted in multiple languages, located near the phones banks inside every dormitory, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display reporting instructions to include telling a family member or friend can file a third-party grievance via the agency’s online complaint form on the agency website.

During the on-site phase of the audit, the Auditor conducted twenty-eight interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmate from every housing dormitory and of various diversities were interviewed. All inmates interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates also acknowledged the zero tolerance policy on sexual abuse and sexual harassment and the various ways to report such incidents.
When questioned about third party reporting, all twenty-eight inmates interviewed acknowledged how to submit a third party report (ask a family member or friend to submit a report or contact the PREA Ombudsman). In addition, several of the inmates referred to the informational bulletin boards in each dorm, which contains the directions on how to submit a third party report.

During the pre-on-site phase of the audit, the Auditor visited the agency’s website and confirmed the availability for the public to submit a report of sexual abuse or sexual harassment on behalf of an inmate. The report may also be submitted anonymously.

Upon review of the policies and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? ☒ Yes ☐ No

115.61 (c)
Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes  ☐ No

Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes  ☐ No

115.61 (d)

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes  ☐ No

115.61 (e)

Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
- Random sample of Staff
- Medical / Mental Health Staff
- Facility Warden
Texas Department of Criminal Justice Safe Prisons/PREA Plan states all staff members shall immediately report, according to TDCJ policy, any knowledge suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against inmates or staff who reported an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states staff will not reveal any information related to the sexual abuse report to anyone other than designated supervisors or officials, and only to the extent necessary to make informed treatment, investigative, security, and management decisions.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the on-site phase of the audit, the Auditor conducted two interviews with Medical and Mental Health Staff regarding responsibilities to disclose to inmates the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Each Medical and Mental Health Staff member articulated in detail step-by-step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Staff member acknowledged disclosing the confidentiality limitation prior to the initiation of services with any inmate. The Auditor inquired if any inmates had reported an incident of sexual abuse or harassment during the past 12 months to them and both denied ever receiving a report of this nature from an inmate at the Havins Unit.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired how Havins Unit responds when an allegation of sexual abuse or sexual harassment is make by someone under the age of 18 or someone who is considered vulnerable adult under state law. The Facility Warden explained that Havins Unit does not house inmates under the age of 18 nor inmates who are considered vulnerable adults.

The Auditor inquired to the Facility Warden are allegations of sexual abuse and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Warden indicated
all allegations of sexual abuse and sexual harassment, no matter the origin of reporting, are reported directly to the Office of the Inspector General.

Upon review of the policies and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.62: Agency protection duties**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes  ☐ No

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

Texas Department of Criminal Justice *Safe Prisons/PREA Plan*

Interviews conducted with:

Agency Head
Facility Warden
Random sample of Staff
Texas Department of Criminal Justice Safe Prisons/PREA Plan states all staff members shall immediately report, according to TDCJ policy, any knowledge suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against inmates or staff who reported an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Texas Department of Criminal Justice Procedure Safe Prisons/PREA Plan states inmates at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregated housing while completing the assessment, for no longer than 24 hours.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states if a protective safekeeping housing assignment is made, the unit shall clearly document the basis of the concern for the inmate’s safety and the reason why no alternative means of separation can be arranged.

During the 12 months prior to the audit, the facility reported in the PAQ there were no inmates at risk of imminent sexual abuse. During the on-site phase of the audit, the Auditor interviewed the Classification Supervisor, PREA Compliance Managers and the Facility Warden and each confirmed the information previously provided by the facility in the PAQ.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff and inquired about his/her actions if they received information that an inmate was in imminent risk of sexual abuse. Each staff member articulated the agency’s response protocol to receiving such information and all staff members interviewed confirmed the first priority is ensuring the safety of the inmate. Staff indicated that once the inmate who was at risk is secured, they would immediately notify their Supervisor.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Facility Warden informed the Auditor that once a staff member receives information that an inmate may be at risk for sexual abuse, that inmate is immediately removed from the area. The inmate victim’s housing preference is considered, however the decision on his ultimate placement is driven by the need for protection from possible abuse and/or retaliation.
During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Agency Head stated if an inmate is at risk of imminent sexual abuse the first thing staff will be responsible for separating the victim from the potential abuser. The potential victim will be given the opportunity to speak with a staff member regarding the situation as well as Medical and Mental Health. If necessary, a housing change or facility transfer may be required for that inmate. The inmate may also request to be reviewed for placement in Protective Safekeeping custody level.

Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.63: Reporting to other confinement facilities**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ☒ Yes  ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes  ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes  ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes  ☐ No

**Auditor Overall Compliance Determination**

☒      Exceeds Standard *(Substantially exceeds requirement of standards)*
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Agency Head
Facility Warden

Texas Department of Criminal Justice Safe Prisons/PREA Plan states after receiving an allegation that an inmate was sexually abused while confined at another facility, such as a county jail or out of state facility, the individual taking the initial report shall immediately notify the Unit Safe Prisons/PREA Compliance Manager. The USPPM shall provide the SPPMO with the details of the alleged incident so the SPPMO may initiate notification to the appropriate office of the outside agency where the alleged abuse occurred. Notification to the appropriate agency shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

In the twelve months prior to the audit, Havins Unit reported receiving no allegations of sexual abuse from another facility and one allegation was received from a Havins Unit inmate alleging sexual abuse while confined at another facility.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the facility. The Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notification would be made to the Office of the Inspector General and the PREA Ombudsman for investigation.
During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired if another agency or facility refers allegations of sexual abuse that occurred within one of your facilities, if there a designated point of contact. The Agency Head explained that the point of contact for all sexual abuse related incidents is either the Office of the Inspector General or the PREA Ombudsman for investigation.

Upon review of the policy, documentation, and investigative files, and upon completion of the interviews conducted, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

### Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

#### 115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**
☐  **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒  **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐  **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

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Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Texas Department of Criminal Justice Staff PREA Training Curriculum

Texas Department of Criminal Justice Havins Unit Training Roster / Staff Signatures

Interviews conducted with:

Security Staff / Non-Security Staff First Responders

Random sample of Staff

Texas Department of Criminal Justice Safe Prisons/PREA Plan states upon learning of an allegation that an inmate was sexually abused, the first correctional officers to responding to the report shall:

- Separate the alleged victim and assailant;
- Preserve and protect the crime scene, if applicable, until appropriate steps can be taken to collect evidence;
- Request that the alleged victim not take any actions that could destroy physical evidence, including washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence;
- Request that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; If the abuse occurred within a time period that still allows for the collection of physical evidence,
• If the first responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify a correctional officer.

During the on-site phase of the audit, the Auditor conducted random Staff interviews and five targeted interviews (Security and Non-Security Staff who act as First Responders) regarding his/her role as a First Responder to an allegation of sexual abuse. All Staff Members interviewed provided specific details of his/her responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health and an immediate Supervisor.

In addition, each Staff Member acknowledged the importance of the agency’s response protocol to a sexual abuse allegation as well as his or her role as a First Responder. Every Staff Member interviewed articulated in detail the responsibilities of a First Responder and the importance of his/her responsibility when responding to an incident of sexual abuse or sexual harassment as well as the importance of ensuring the victim is safe.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

Upon review of the policy, documentation, and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.65: Coordinated response**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? ☒ Yes ☐ No
Auditor Overall Compliance Determination

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Program, Havins Unit Sexual Abuse Coordinated Response Plan

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:

Facility Warden

Texas Department of Criminal Justice Havins Unit Sexual Abuse Coordinated Response Plan outlines the facility’s written plan to coordinate actions taken in response to an incident of sexual abuse. Any employee who has knowledge of or receives information, written or verbal (first hand or third party) regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor or the Chief of Security, who will then take immediate steps to evaluate the inmate’s concern/allegation.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states upon learning of an allegation that an inmate was sexually abused, the first correctional officers to responding to the report shall:

- Separate the alleged victim and assailant;
- Preserve and protect the crime scene, if applicable, until appropriate steps can be taken to collect evidence;
• Request that the alleged victim not take any actions that could destroy physical evidence, including washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence;
• Request that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; if the abuse occurred within a time period that still allows for the collection of physical evidence,
• If the first responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify a correctional officer.

The Auditor established, from a thorough review of TDCJ policy, that investigators assigned to the Office of the Inspector General’s office follow the United States Department of Justice, *A National Protocol for Sexual Assault Medical Forensic Examinations* a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services. Attempts shall be made to make a victim advocate from a rape crisis center available to the inmate victim first, however if one is not available, the unit shall make a qualified staff member from a community-based organization or a qualified TDCJ staff member available. The victim advocate or qualified TDCJ staff member, or qualified community-based organization staff member shall:

• Accompany and support the victim through the forensic medical examination process and investigatory interviews;
• Provide emotional support, crisis intervention, information, and referrals; and
• Not delay or otherwise impede the screening or stabilization of an emergency medical condition.

During the pre-on-site phase of the audit, the Auditor reviewed *Havins Unit PREA Coordinated Response Plan*. The plan is very detailed, provides systematic instructions, and outlines the roles and responsibilities for all staff responding to an incident of sexual abuse.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to the implementation of the *Havins Unit Sexual Abuse Coordinated Response Plan*. The Facility Warden provided a detailed description of the response plan and each staff member’s responsibility when responding to an allegation of sexual abuse.
Upon review of the policies and upon completion of the on-site interview with the Facility Warden, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

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

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.66 (a)**

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency’s behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No

**115.66 (b)**

- Auditor is not required to audit this provision.

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Interviews conducted with:

Agency Head
Texas Department of Criminal Justice does not have a collective bargaining agreement.

During the on-site phase of the audit, the Auditor verified that the TDCJ and the facility does not engage in collective bargaining during interviews with the Facility Warden, the PREA Ombudsman, and Agency Head.

Upon review of the policies and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.67: Agency protection against retaliation**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.67 (a)**

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

**115.67 (b)**

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

**115.67 (c)**

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ☒ Yes ☐ No
Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes  ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes  ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes  ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? ☒ Yes  ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☒ Yes  ☐ No

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes  ☐ No

115.67 (d)

In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes  ☐ No

115.67 (e)

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? ☒ Yes  ☐ No

115.67 (f)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Designated Member Charged with Monitoring Retaliation
Inmates who reported a Sexual Abuse
Facility Warden
Agency Head

Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders states the TDCJ has zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of inmates. An employee is prohibited from subjecting another employee, inmate, or other individual to harassment or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with inmates.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliations by other inmates or staff. The Unit Safe Prison/PREA Compliance Manager shall monitor for incidents of retaliation.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states as appropriate, multiple protective measures may be taken, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmate or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states for at least 90 days, following a report of sexual abuse, the USPPM shall monitor and document the conduct and treatment of inmates or staff who reported the sexual abuse, for changes that may indicate possible retaliation by inmates or staff, and shall act promptly to address any retaliation. The monitoring shall also include periodic status checks of inmates.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states if any other individual who cooperates with an investigation expresses a fear of retaliation, the TDCJ shall take appropriate measures to protect that individual against retaliation. If the TDCJ investigation determines the allegation to be unfounded, the monitoring shall discontinued.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Staff Member designated with monitoring retaliation. The Staff Member articulated that in an effort to prevent retaliation against inmates and staff who report sexual abuse or harassment or those who cooperate with an investigation, the Staff Member would monitor those individuals for at least 90 days. The Staff Member reviews disciplinary reports, inmate housing or transfers, and negative performance reviews of staff members. If a concern that potential retaliation might occur beyond the 90 days, the Staff Member would continue to monitor conduct and treatment until the issue or threat is resolved.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

During the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor where there any inmates placed in segregated housing due to risk of sexual victimization. Therefore, inmates in these targeted categories were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired on the different measures taken to protect inmates and staff from retaliation for reporting allegations of sexual abuse or sexual harassment. The Facility Warden confirmed the facility would take all necessary steps to protect any person who reports a sexual abuse / harassment incident from retaliation. The Facility Warden explained
that housing changes or transfers of inmates, disciplinary action against staff members – including possible dismissal – or other means of removal of those who retaliate against someone who reports an allegation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency protects inmates or staff from retaliation for sexual abuse or sexual harassment allegations. The Agency Head explained that facilities deploy numerous measures including housing, program, and work assignments changes. If warranted, an inmate may be transferred to another facility in order to protect her from retaliation. All inmates who report sexual abuse are monitored for retaliation for at least 90 days. Staff members are required to monitor the inmate with periodic status checks every 30 days to ensure they are not experiencing any additional problems. Inmates are also provided information for the local rape crisis center for emotional support services.

The Agency Head also explained that staff members might be afforded the ability to change posts or facilities to protect them from retaliation. They are also monitored for retaliation for at least 90 days following a report of sexual abuse or sexual harassment.

The Auditor inquired to the Agency Head if an individual cooperates with an investigation expresses a fear of retaliation, what measures does the agency take to protect that individual against retaliation. The Agency Head explained the same process previously described is utilized. If the individual is an inmate, he may be afforded a housing change or transfer to another facility. That inmate will also be subject to the 90-day monitoring. If the individual is a staff member, they may be provided the opportunity to change posts or institutions and will be subject to the 90-day monitoring.

Upon review of the policy, investigative files, and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.68: Post-allegation protective custody**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes ☐ No
Auditor Overall Compliance Determination

☐  **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒  **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐  **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

Texas Department of Criminal Justice Procedure  *Safe Prisons/PREA Plan*

Texas Department of Criminal Justice  *Protective Safekeeping Plan*

Texas Department of Criminal Justice  *Restrictive Housing Plan*

Interviews conducted with:

Facility Warden

Staff who supervise inmates in Segregated Housing

Texas Department of Criminal Justice Procedure  *Safe Prisons/PREA Plan* states inmates at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregated housing while completing the assessment, for no longer than 24 hours.

Texas Department of Criminal Justice  *Safe Prisons/PREA Plan* states if a protective safekeeping housing assignment is made, the unit shall clearly document the basis of the concern for the inmate’s safety and the reason why no alternative means of separation can be arranged.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmates placed in protective safekeeping for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the unit restricts access to programs, privileges, education, or work opportunities, the unit shall document the opportunities that have been limited, the duration of the limitations, and the reasons for the limitations. Every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the inmate from the general population.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmates placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an inmate has restrictions placed on her it would be a result of behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment, and no inmates assigned to involuntary segregated housing. Additionally, during the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor where there any inmates placed in segregated housing due to risk of sexual victimization.

During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported and no inmates were placed in segregated housing due to risk of sexual victimization in the twelve months prior to the audit. Therefore, inmates in these targeted categories were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates who alleged sexual abuse. Inmates who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing (Safekeeping), either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible and the inmate will be released from segregation as soon as it can be
determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**INVESTIGATIONS**

**Standard 115.71: Criminal and administrative agency investigations**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No

- Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No

- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? ☒ Yes ☐ No
<table>
<thead>
<tr>
<th>115.71 (e)</th>
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<tbody>
<tr>
<td>▪ Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as inmate or staff? ☒ Yes ☐ No</td>
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<tr>
<td>▪ Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No</td>
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<th>115.71 (f)</th>
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<tr>
<td>▪ Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No</td>
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<tr>
<td>▪ Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? ☒ Yes ☐ No</td>
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<th>115.71 (g)</th>
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<tbody>
<tr>
<td>▪ Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? ☒ Yes ☐ No</td>
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<tr>
<th>115.71 (h)</th>
<th></th>
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<tbody>
<tr>
<td>▪ Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No</td>
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<th>115.71 (i)</th>
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<tr>
<td>▪ Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No</td>
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<th>115.71 (j)</th>
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<tr>
<td>▪ Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No</td>
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<th>115.71 (k)</th>
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<tr>
<td>▪ Auditor is not required to audit this provision.</td>
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<th>115.71 (l)</th>
<th></th>
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<tr>
<td>▪ When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA</td>
<td></td>
</tr>
</tbody>
</table>
Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 05.01, *Sexual Abuse Response, & Investigation*

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, *Training Procedures*

Texas Department of Criminal Justice Office of the Inspector General 03.72, *Record Retention – PREA*

Texas Department of Criminal Justice Executive Directive 16.41, *Use of Polygraph Examinations*


Interviews conducted with:

Investigative Staff

On-site Review Observations:

Training files

Texas Department of Criminal Justice Administrative Directive 16.20, *Reporting Incidents/Crimes to Office of Inspector General* outlines the legal authority and jurisdiction of the OIG as the primary investigating law enforcement agency for the TDCJ and criminal offenses on TDCJ property. In accordance with Texas Government
Code § 493.019, the Office of the Inspector General (OIG) is the primary investigative and law enforcement entity of the TBCJ. The OIG reports directly and only to the Texas Board of Criminal Justice.

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, *Training Procedures* establishes the requirements for all OIG employees to receive appropriate and relevant job-related training. Documentation and maintaining the agency’s training records is the responsibility of the Training Department.

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, *Training Procedures* and the SAFE Prisons/PREA Plan outlines the specialized requirements, which must be obtained in addition to the mandatory state law enforcement training. TDCJ policy requires that OIG investigators shall receive training specific to conducting sexual assault investigations in confinement settings as well as training on the Prison Rape Elimination Act (PREA) standards. TDCJ policy also designates that specialized training shall include interviewing sexual abuse victims, application of Miranda and Garrity, sexual abuse evidence collection, and the evidence necessary to substantiate a case for prosecution referral.

Texas Department of Criminal Justice Office of Inspector General Operational Manual 02.15, *Training Procedures* states in addition to the general training provided to all employees pursuant to 23 CFR 115.31, the agency shall ensure that Inspectors have received training in conducting of such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, appropriate application of *Miranda* and *Garrity* warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National Institute of Corrections (NIC), *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

The Auditor reviewed several TDCJ policies and confirmed the agency policy shall not require an inmate who alleges sexual abuse to submit to a polygraph examination as a condition for proceeding with the investigation of such an allegation.
Texas Department of Criminal Justice Office of the Inspector General 03.72, Record Retention – PREA states all administrative and criminal investigative reports involving any sexual assault related offenses, pursuant to a sexual battery investigation, as long as the alleged suspect is incarcerated, supervised, or employed by the agency plus five years.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National Institute of Corrections (NIC), Specialized Training: Investigating Sexual Abuse in Confinement Settings and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an Investigator assigned to the Office of the Inspector General’s office who confirmed his attendance and successful completion of the required specialized training curriculum from the National Institute of Corrections, Specialized Training: Investigating Sexual Abuse in Correctional Settings.

The Investigator clearly articulated the comprehensive training he had received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

The Investigator also confirmed agency policy requiring all criminal allegations of sexual abuse must be referred to the Office of the Inspector General. Additionally, the Investigator confirmed all OIG Investigators are certified peace officers, as authorized by Texas Code of Criminal Procedures, Article 2.12 and licensed by the Texas Commission on Law Enforcement (TCOLE).

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.
During the on-site phase of the audit, the Auditor conducted an interview with an Investigator from the Office of Inspector General and requested to the Investigator to provide an overview of the investigative process and the documentation required in a case when an allegation of sexual abuse or sexual harassment incident occurs within the facility. The Investigator explained upon receiving notification of a sexual assault incident, the investigation is initiated promptly and is completed thoroughly and objectively by a qualified investigator from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations. The Investigator explained the initial process includes conducting scene investigation, collecting evidence (biological or trace), photographs, interview staff, witnesses, review unit documentation pertaining to the investigation, and interviewing the victim – depending on emotional and physical state.

The Investigator also provided an overview of the various documents contained in each case file to include but not limited to the initial incident reports, notifications, medical and mental health forms, inmate rosters, advocacy information, witness statements, victim and alleged aggressor statements, investigative report, Office of the Inspector General Inquiry Report, notification of case disposition to inmate (offender acknowledgement), 90-day monitoring, status check history, and the Required Procedures Log.

Upon review of the policies and documentation listed above, and upon completion of the interviews with specialized staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*
Instructions for Overall Compliance Determination Narrative

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Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Investigative Staff

Texas Department of Criminal Justice Safe Prisons/PREA Plan states administrative investigations shall include an effort to determine if staff actions or inactions contributed to the abuse and be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations shall be documented in accordance with OIG policies and procedures. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution in accordance with OIG policies and procedures.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states no standard higher than the preponderance of evidence shall be imposed in determining if allegations of sexual abuse or sexual harassment are substantiated.

During the on-site phase of the audit, the Auditor conducted an interview an investigator assigned to the Office of the Inspector General. The Investigator provided the Auditor with a complete overview of the investigative process to include verifying specialized training credentials. The Investigator articulated the investigative process beginning with initial notification, investigation of the allegation, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity, and criteria required for administrative action and prosecution referrals. The Auditor inquired to the Investigator what standard of evidence is required to substantiate allegations of sexual
abuse or sexual harassment. The Investigator explained that the agency should impose no standard higher than a preponderance of the evidence.

Upon review of the policy and upon completion of the interview with staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☐ Yes ☐ No ☐ NA

115.73 (c)

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate’s unit? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No
has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (d)

- Following an inmate’s allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No
- Following an inmate’s allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

**Auditor Overall Compliance Determination**

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

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Documents:
Texas Department of Criminal Justice *Safe Prisons/PREA Plan*

Interviews conducted with:
Investigative Staff
Texas Department of Criminal Justice Safe Prisons/PREA Plan outlines the Unit Safe Prisons/PREA Compliance Manager responsibilities to inform the alleged offender victim of sexual abuse when the criminal case outcomes or status changes occur. These changes include when the allegation has been determined to be substantiated, unsubstantiated, or unfounded, or the staff member or inmate assailant has been indicted or convicted on a charge related to sexual abuse within TDCJ.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states unless the allegation is unfounded, following an inmate’s allegation that a staff member has committed sexual abuse against him/her, the Warden shall inform the inmate whenever the staff member is no longer assigned to the facility or no longer employed by TDCJ.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator from the Office of Inspector General and requested to the Investigator to provide an overview of the investigative process and the documentation required in a case when an allegation of sexual abuse or sexual harassment incident occurs within the facility. The Investigator explained upon receiving notification of a sexual assault incident, the investigation is initiated promptly and is completed thoroughly and objectively by a qualified investigator from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations. The Investigator explained the initial process includes conducting scene investigation, collecting evidence (biological or trace), photographs, interview staff, witnesses, review unit documentation pertaining to the investigation, and interviewing the victim – depending on emotional and physical state.

The Investigator also provided an overview of the various documents contained in each case file to include but not limited to the initial incident reports, notifications, medical and mental health forms, inmate rosters, advocacy information, witness statements, victim and alleged aggressor statements, investigative report, Office

During the interview, the Auditor inquired to the Investigator about the agency’s notification procedures, to an alleged victim of sexual abuse, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or unfounded. The Investigator confirmed such notifications are completed by the Safe Prison/PREA Compliance Manager and is documented upon completion.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an inmate who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that once the Office of Inspector General notifies the facility of the outcome of each investigation, the Unit Safe Prison/PREA Compliance Manager completes the inmate notification process.

Upon review of the policies and upon completion of the interviews with specialized staff, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**DISCIPLINE**

**Standard 115.76: Disciplinary sanctions for staff**

*All Yes/No Questions Must Be Answered by the Auditor to Complete the Report*

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and
circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? ☒ Yes  ☐ No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes  ☐ No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Administrative (Human Resources) Staff

Texas Department of Criminal Justice Safe Prisons/PREA Plan states termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of TDCJ policies relating to sexual abuse or sexual harassment, that do not involve actual sexual abuse, shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states all terminations for violations of TDCJ sexual abuse and sexual harassment policies, or resignations in lieu of termination, shall be reported to the OIG, unless the activity was clearly not criminal, and to any relevant licensing bodies.

The facility reported no staff violations or terminations of the agency’s sexual abuse or sexual harassment polices during the 12 months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with Administrative / HR Staff Member who confirmed that Havins Unit had no staff members violate or terminated for violating the agency’s policy against sexual abuse or sexual harassment during the past 12 months.

Upon review of the policy, personnel files, and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### Standard 115.77: Corrective action for contractors and volunteers

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.77 (a)**

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

**115.77 (b)**

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*
**Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

**Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

**Documents:**
- Texas Department of Criminal Justice Safe Prisons/PREA Plan
- Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders

**Interviews conducted with:**
- Facility Warden

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all contractors and volunteers who have contact with inmates shall be trained regarding sexual abuse and sexual harassment prevention, detection, and response policies and procedures in accordance with the TDCJ Volunteer Services Plan PD-29, Sexual Misconduct with Offenders.

Texas Department of Criminal Justice Executive Directive PD-29, Sexual Misconduct with Offenders states the TDCJ has zero tolerance for sexual misconduct, sexual abuse, and sexual harassment of inmates. An employee is prohibited from subjecting another employee, inmate, or other individual to harassment or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct with inmates.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states contractors or volunteers that engage in sexual abuse shall be prohibited from contact with inmates and shall be reported to applicable law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The unit shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by the contractor or volunteer.
The facility reported there have been no contractor or volunteer violations or terminations of the agency’s sexual abuse or sexual harassment polices during the 12 months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding any violation of the facility’s sexual abuse and sexual harassment by a contractor or volunteer. The Facility Warden explained that the incident would be reported to the Office of the Inspector General, which would conduct an investigation. If the investigation shows the activity was criminal, then the incident will be reported to law enforcement. The Facility Warden also explained the incident would be reported to any relevant licensing entities and the contractor or volunteer would be prohibited from any further contact at Havins Unit or any facility within our agency.

Upon review of the policy and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.78: Disciplinary sanctions for inmates**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require
the offending inmate to participate in such interventions as a condition of access to
programming and other benefits? ☒ Yes  ☐ No

115.78 (e)

☒ Does the agency discipline an inmate for sexual contact with staff only upon a finding that the
staff member did not consent to such contact? ☒ Yes  ☐ No

115.78 (f)

☒ For the purpose of disciplinary action does a report of sexual abuse made in good faith based
upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an
incident or lying, even if an investigation does not establish evidence sufficient to substantiate
the allegation? ☒ Yes  ☐ No

115.78 (g)

☒ If the agency prohibits all sexual activity between inmates, does the agency always refrain from
considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the
agency does not prohibit all sexual activity between inmates.) ☒ Yes  ☐ No  ☐ NA

Auditor Overall Compliance Determination

☒ Meets Standard (Substantial compliance; complies in all material ways with the
standard for the relevant review period)

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the
compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's
conclusions. This discussion must also include corrective action recommendations where the facility does
not meet the standard. These recommendations must be included in the Final Report, accompanied by
information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Disciplinary Rules & Procedures for Offenders
Texas Department of Criminal Justice Inmate Orientation Handbook

Interviews conducted with:
Facility Warden
Medical / Mental Health Staff

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or sexual harassment, or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states sanctions will be appropriate to the nature of abuse committed, the inmate’s disciplinary history, and the sanction imposed for comparable offenses by other inmates with similar histories. Consideration shall be given whether the inmate’s mental disabilities or mental illness contributed to the behavior.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states a report of sexual abuse made in good faith, based on a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Texas Department of Criminal Justice Safe Prisons/PREA Plan and the TDCJ Inmate Orientation Handbook states sexual misconduct between inmates is prohibited and shall result in disciplinary sanctions in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the facility's policy on disciplinary sanctions for an inmate after an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The Facility Warden referred to the existing policy that an inmate would be subject to disciplinary sanctions, which would be conducted in accordance to the formal disciplinary process.

During the on-site phase of the audit, the Auditor conducted an interview with two Medical and Mental Health Staff members and discussed the victim advocate services available to inmates and counseling services available for abusers. Both Medical and Mental Health Staff member explained the services provided at the facility and through the local county crisis center, include one-on-one counseling, and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.
Upon review of the policy, Texas Department of Criminal Justice Inmate Orientation Handbook, and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### MEDICAL AND MENTAL CARE

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.81 (a)
- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
  - ☒ Yes  □ No  □ NA

#### 115.81 (b)
- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
  - ☒ Yes  □ No  □ NA

#### 115.81 (c)
- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?
  - ☒ Yes  □ No

#### 115.81 (d)
- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?
  - ☒ Yes  □ No

#### 115.81 (e)
Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Inmates who disclose Sexual Victimization at Risk Screening
Staff responsible for Risk Screening

On-site Review Observations:
Inmate records of initial assessment & reassessment

Texas Department of Criminal Justice Safe Prisons/PREA Plan states if results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states staff shall use appropriate controls to disseminate responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information is not exploited to the detriment of any inmate by staff or other inmates.
Texas Department of Criminal Justice Safe Prisons/PREA Plan states the Unit Classification Committee (UCC) shall use information from the risk-screening document to make housing, bed, work, education, and program assignments with the goal of separating inmates at high risk of being sexually victimized from inmates at high risk of being sexually abusive. The committee shall make individualized determinations regarding how to ensure the safety of each offender.

During the on-site phase of the audit, the Auditor conducted an interview with a PREA Compliance Manager who is responsible for conducting screenings for risk of victimization and abusiveness. The PREA Compliance Manager provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Auditor inquired to the PREA Compliance Manager what actions are taken against inmates who refuse to cooperate or answer the questions in the risk screening process. The PREA Compliance Manager responded that inmates are not required to provide answers, if an inmate refuses to answer, another staff member will conduct a follow-up interview. The PREA Compliance Manager confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process. The PREA Compliance Manager confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities.

The PREA Compliance Manager confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process. The Auditor inquired to the PREA Compliance Manager how Havins Unit protects such sensitive information. The PREA Compliance Manager stated the access to such information is strictly limited to Classification Staff, Safe Prisons Staff, and the Warden.

During the on-site phase of the audit, the Auditor reviewed thirty-one inmate records. These records were selected based upon inmates who disclosed prior sexual victimization, length at facility, and inmates that disclosed sexual orientation as gay, bisexual, transgender, or intersex. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy.

Havins Unit facilities reported eight inmates disclosed prior sexual victimization during the twelve months prior to the audit. During the on-site phase of the audit, the Auditor requested interviews with inmates who disclosed prior sexual victimization. The facility provided the Auditor with documentation showing all eight inmates either
were released from custody of the TDCJ or were transferred to another correctional facility and unavailable for an interview.

Upon review of the policy, documentation, and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**Standard 115.82: Access to emergency medical and mental health services**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.82 (a)**

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? ☒ Yes ☐ No

**115.82 (b)**

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No
  - Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No

**115.82 (c)**

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ☒ Yes ☐ No

**115.82 (d)**

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☑ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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Documents:
Texas Department of Criminal Justice *Safe Prisons/PREA Plan*

Interviews conducted with:
Medical / Mental Health Staff
Security Staff / Non-Security Staff First Responders

On-site Review Observations:
Secondary Medical Records

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states inmate victims of sexual abuse shall receive timely unimpeded access to emergency medical treatment and crisis intervention services, the nature, and scope of which are determined by medical and mental health practitioners according to their professional judgement.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states medical and mental health evaluation and treatment shall be offered to inmate victims of sexual abuse and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.

Texas Department of Criminal Justice *Safe Prisons/PREA Plan* states inmate victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and
sexually transmitted infections prophylaxis in according to professionally accepted standards of care, where medically appropriate.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

During the on-site phase of the audit, the Auditor conducted interviews with two Medical and Mental Health Staff at the facility. During the interviews, the Auditor discussed the required protocols medical staff would complete if an inmate reported an incident of sexual abuse within the Havins facility. The Medical Staff Member described the process to the Auditor to include a systematic overview of the initial treatment process and the steps required. Documentation of the inmate’s medical treatment must be completed on the TDCJ Referral to Medical / Mental Health Services and Correctional Managed Health Care Clinic Notes. The forms have specific requirements to complete and/or make notations as to why the question or process was not completed. All protocols are completed by LPNs and must be reviewed and cosigned by an RN or Clinician.

Additionally, during the interview with the Medical Staff member confirmed inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Staff member explained the services provided at the facility and through the local county crisis center, include one-on-one counseling, and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the agency’s zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of
sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.

Upon review of the policy and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)
- Does the facility offer 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? ☒ Yes  ☐ No

115.83 (b)
- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes  ☐ No

115.83 (c)
- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes  ☐ No

115.83 (d)
- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) ☐ Yes  ☐ No  ☒ NA

115.83 (e)
- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) ☐ Yes  ☐ No  ☒ NA

115.83 (f)
- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☒ Yes ☐ No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☒ Exceeds Standard (Substantially exceeds requirement of standards)
- ☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan

Interviews conducted with:
Medical / Mental Health Staff

Texas Department of Criminal Justice Safe Prisons/PREA Plan states if the results of the screening process indicate that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting...
or in the community, staff shall ensure the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states medical and mental health evaluation and treatment shall be offered to inmate victims of sexual abuse and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states a mental health evaluation of all known inmate-on-inmate abusers shall be attempted within 60 days of learning of such abuse history and treatment shall be offered when deemed appropriate.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

During the on-site phase of the audit, the Auditor conducted an interview with two Medical and Mental Health Staff members at the facility. Medical Staff confirmed that inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. The two Medical and Mental Health Staff members explained the services provided at the facility and through the local county crisis center and include one-on-one counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the 12 months prior to the audit, Havins Unit reported no allegations of sexual abuse or sexual harassment. During the on-site phase of the audit, the Auditor conducted specialized interviews with the Facility Warden, PREA Compliance Manager, and a Classification Staff Member. All three confirmed no allegations of sexual abuse or sexual harassment were reported in the twelve months prior to the audit. Therefore, inmates in this targeted category were not interviewed.
Upon review of the policy and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

**DATA COLLECTION AND REVIEW**

**Standard 115.86: Sexual abuse incident reviews**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? ☒ Yes ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? ☒ Yes ☐ No

- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No

- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? ☒ Yes ☐ No

- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No

- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No
115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Texas Department of Criminal Justice Administrative Incident Reviews

Interviews conducted with:

Facility Warden

Incident Review Team

Texas Department of Criminal Justice Safe Prisons/PREA Plan states an administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined unfounded. The Unit Warden shall obtain input from security supervisors, investigators, and medical and mental health practitioners when completing the review. The administrative review shall be completed within 30 days of an investigation being completed.

During the on-site phase of the audit, the Auditor reviewed Texas Department of Criminal Justice Administrative Incident Review provided by the facility. The reports contained the required elements of the PREA standard to include:
Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;

- Consider whether the incident or allegation was motivated by race, ethnicity, gender identity; LGBTI identification, status, or perceived status or gang affiliation; or was motivated or otherwise caused by other group dynamics;
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Assess the adequacy of the staffing levels in that area during different shifts;
- Assess whether monitoring technology would be deployed or augmented to supplement supervision by staff; and
- Recommendations to the Facility Administrator and Unit Safe Prisons/PREA Compliance Manager for improvement based on the above assessments.

During the on-site phase of the audit, the Auditor conducted an interview with an Incident Review Team member and inquired if the Incident Review Team considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the Incident Review Team examines the area in the facility where the incident allegedly occurred. The Incident Review Team member confirmed the Incident Review Team does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. The Incident Review Team also tours the area where the alleged incident occurred as well as consider if additional monitoring technology should be deployed or augmented to supplement supervision by staff. The Incident Review Team member explained how touring the area in conjunction with reviewing monitoring technology provides the team with the best possible representation of an incident and assists the Incident Review Team in determining if changes or additions to monitoring technology is warranted.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the incident review process. The Facility Warden explained the Incident Review Team includes upper-level management with input from Investigators, Line Staff, and Medical and Mental Health personnel. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained how the Incident Review Team uses the information obtain from the review to determine if changes need to be made to the physical plant, surveillance systems, policy and procedure or any other change that would improve the safety of the inmate population and prevent sexual abuse.

Upon review of the policy and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? ☒ Yes ☐ No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? ☒ Yes ☐ No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? ☒ Yes ☐ No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☒ Yes ☐ No ☐ NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

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

☐ Does Not Meet Standard *(Requires Corrective Action)*
Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 01.01, Safe Prisons/Management
Texas Department of Criminal Justice Safe Prisons/PREA Program Reports

Texas Department of Criminal Justice Safe Prisons/PREA Plan states accurate, uniform data shall be collected for every incident of sexual abuse alleged to have occurred at a TDCJ facility using a standardized instrument and set of definitions. Incident based sexual abuse data shall be aggregated at least annually.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states the incident-based data collected shall include, at a minimum, information necessary to answer all questions form the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. All available incident-based documents, including reports, investigation files, and sexual abuse incident reviews shall be maintained, reviewed, and collected as needed to complete the SSV.

Texas Department of Criminal Justice Safe Prisons/PREA Operations Manual 01.01, Safe Prisons/Management Office states the Safe Prisons PREA Management Office shall:

- Enter data related to reported offender-on-offender sexual abuse allegations provided by the Emergency Action Center in the Safe Prisons Sexual Assault Database.
- Ensure receipt of the Safe Prisons/PREA Monthly Report E-form from each unit by the fifth business day of each month for the previous month’s Safe Prisons activity and notify the unit warden when a report is delinquent.
- Compile and provide a monthly report to the Correctional Institutions Division (CID) directors utilizing the information obtained from the monthly Safe Prisons/PREA Report, the Emergency Action Center,

- Identify trends related to time frames in which sexual abuse allegations are reported to have occurred, location of alleged incidents, demographics related to sexual abuse victim and assailants, and custody classes with higher rates of alleged sexual abuse reports.
- Prepare technical reports concerning identified trends to assist agency administration in making decisions related to unit operations.
- Enter Safe Prisons/PREA Adjustment Codes for electronic notification and tracking of sexual predators, potential sexual predators, sexual victims, extortionists, and extortion victims on the offenders UCR-07 Adjustment Screen.

During the pre-on-site phase of the audit, the Auditor reviewed six years of Safe Prisons/PREA Program Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Texas Department of Criminal Justice publishes the reports on the agency website http://www.tdcj.texas.gov/tbcj/prea.html

Upon review of the policy, and Safe Prison/PREA Program Reports, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes  ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes  ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies,
practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☒ Yes ☐ No

115.88 (b)

- Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse ☒ Yes ☐ No

115.88 (c)

- Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:

Texas Department of Criminal Justice Safe Prisons/PREA Plan

Texas Department of Criminal Justice Safe Prisons/PREA Program Reports (Annual Reports)

Interviews conducted with:

PREA Compliance Manager

PREA Coordinator / Ombudsman

Agency Head
During the pre-on-site phase of the audit, the Auditor reviewed six years of Safe Prisons/PREA Program Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Texas Department of Criminal Justice publishes the reports on the agency website http://www.tdcj.texas.gov/tbcj/prea.html

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the agency collects data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies. The PREA Compliance Manager confirmed the unit Safe Prison/PREA Compliance Manager is responsible for compiling unit specific PREA data monthly, and forwarding the report to the Safe Prison Management Office for review and publication.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Ombudsman regarding how data is collected pursuant to PREA Standard §115.87. The PREA Ombudsman acknowledged that the data collected is securely retained and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Ombudsman confirmed the preparation of an annual report (Safe Prisons/PREA Program Report), which contains data collected from all TDCJ facilities; it is then reviewed by the Regional Office and the Safe Prisons/PREA Management Office who then collectively, compile the Safe Prisons/PREA Program Report, which includes the findings and any potential corrective action. The PREA Ombudsman confirmed the agency redacts sensitive information and all public data information.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response polices, practices, and training. The Agency Head explained that sexual abuse data is collected annually and utilized to complete the Survey of Sexual Victimization. The data is collected from all facilities that house TDCJ inmates; it is then reviewed by the Regional Office and the Safe Prisons Management Office who will then complete a report of the findings and any potential corrective action. The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head confirmed, as the TDCJ Correctional Institutions Division Director, he is responsible for reviewing and approving the annual PREA report.
Upon review of the policy, Safe Prisons/PREA Program Reports, and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
  ☒ Yes  ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?
  ☒ Yes  ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?
  ☒ Yes  ☐ No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?
  ☒ Yes  ☐ No

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor’s
conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents:
Texas Department of Criminal Justice Safe Prisons/PREA Plan
Texas Department of Criminal Justice Safe Prisons/PREA Program Reports (Annual Reports)

Interviews conducted with:
PREA Coordinator / Ombudsman

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all data collected shall be securely maintained. Aggregated sexual abuse data, from all TDCJ operated facilities, including privately contracted facilities, shall be readily available to the public at least annually, through a website or other means. Personal identifiers and sensitive information shall be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a unit, while maintaining the nature of the material.

Texas Department of Criminal Justice Safe Prisons/PREA Plan states all sexual abuse data collected shall be maintained for at least ten years after the date of the initial collection unless Federal, State, or local law requires otherwise.

During the pre-on-site phase of the audit, the Auditor reviewed six years of Safe Prisons/PREA Program Reports (annual reports), which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Texas Department of Criminal Justice publishes the reports on the agency website [http://www.tdcj.texas.gov/tbcj/prea.html](http://www.tdcj.texas.gov/tbcj/prea.html)

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Ombudsman regarding how data is collected pursuant to PREA Standard §115.87. The PREA Ombudsman acknowledged that the data collected is securely retained and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Ombudsman confirmed the preparation of an annual report (Safe Prisons/PREA Program Report), which contains data collected from all TDCJ facilities; it is then reviewed by the Regional Office and the
Safe Prisons/PREA Management Office who then collectively, compile the *Safe Prisons/PREA Program Report*, which includes the findings and any potential corrective action. The PREA Ombudsman confirmed the agency redacts sensitive information and all public data information.

Upon review of the policy and upon completion of staff interviews, Havins Unit demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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<thead>
<tr>
<th>115.401 (a)</th>
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<td>▪ During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (<em>Note: The response here is purely informational. A &quot;no&quot; response does not impact overall compliance with this standard.</em>)</td>
<td>☒ Yes ☐ No</td>
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<th>115.401 (b)</th>
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<td>▪ Is this the first year of the current audit cycle? (<em>Note: a “no” response does not impact overall compliance with this standard.</em>)</td>
<td>☐ Yes ☒ No</td>
</tr>
<tr>
<td>▪ If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)</td>
<td>☒ Yes ☐ No ☐ NA</td>
</tr>
<tr>
<td>▪ If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)</td>
<td>☐ Yes ☐ No ☒ NA</td>
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<th>115.401 (h)</th>
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<td>▪ Did the auditor have access to, and the ability to observe, all areas of the audited facility?</td>
<td>☒ Yes ☐ No</td>
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<th>115.401 (i)</th>
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<tr>
<td>▪ Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?</td>
<td>☒ Yes ☐ No</td>
</tr>
</tbody>
</table>
Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
☒ Yes  ☐ No

Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?
☒ Yes  ☐ No

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Texas Department of Criminal Justice, Havins Unit had its first PREA Audit conducted on July 14 - 16, 2015; the second year of the first three-year cycle. Havins Unit had its second PREA Audit July 14 – 16, 2018; the second year of the second three-year auditing cycle. This audit was the facility’s third audit and was conducted on July 14 – 16, 2021; the second year of the third three-year auditing cycle.

The Auditor was provided access to and observed all areas of the facility and outside compound. The Auditor was permitted to request and receive copies of any relevant documents.

The Auditor was permitted to conduct private interviews with inmates and staff. The Auditor verified the posting of the audit notifications including posting of the audit in all housing dormitory’s and common areas accessible and visible for inmates and staff. The Auditor verified through inmate and staff interviews that inmates and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel.
Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Texas Department of Criminal Justice publishes all PREA Audit Reports for all facilities within the TDCJ on the agency website. The reports are grouped according to the audit cycle year. Havins Unit has published the prior PREA Audit Reports on the agency website. The Auditor reviewed the prior PREA Audit Reports (July 2015 & July 2018) for Havins Unit.
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.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

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Lynni O'Haver 09.07.2021

Auditor Signature Date

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¹ See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110.