

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



**[Following information to be populated automatically from pre-audit questionnaire]**

<b>Name of facility:</b>	<b>Jordan/Baten Complex</b>		
<b>Date report submitted:</b>	<b>October 24, 2014</b>		
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<b>Date of facility visit:</b>	<b>September 29 – October 1, 2014</b>		
<b>Facility Information</b>			
<b>Facility mailing address: (if different from above)</b>	<b>1992 Helton Road, Pampa, Texas 79065</b>		
<b>Telephone number:</b>	<b>409-383-0012</b>		
<b>The facility is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
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<b>Agency Information</b>			
<b>Name of agency:</b>	<b>Texas Department of Criminal Justice (TDCJ)</b>		
<b>Governing authority or parent agency: (if applicable)</b>	<b>State of Texas</b>		
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## **AUDIT FINDINGS**

### **NARRATIVE:**

The PREA audit of the Reeves Jordan/Baten Unit was conducted on September 29 – October 1, 2014 by Barbara Jo Denison, Certified PREA Auditor. Prior to the audit the facility provided to the auditor policies, procedures and facility documentation related to each standard for review. Ongoing communication was held with the Unit Safe Prisons/PREA Manager during this review period in preparation for the on-site visit. The evening prior the audit, the auditor was supplied with a list of offenders sorted by housing units and a list of offenders with special designations as well as a list of facility staff. From these lists offenders and staff were randomly selected to be interviewed during the audit. On the first day of the audit an entrance meeting was held with the following people in attendance: Warden Norris Jackson, Assistant Warden Joe Milbern, Assistant Warden John McDaniel, Major Benny Bundy, Fred Cervantes, Region V Safe Prisons/PREA Manager, Megan Kelley, Unit Safe Prisons/PREA Manager and numerous Captains, Lieutenants, Sergeants and department heads.

Following the entrance meeting a tour of the facility was held from 8:15 a.m. – 12:15 p.m. The following people accompanied the auditor on the tour: Jason Heaton, Region V Director, Wren Howard, Region V Assistant Director, Senior Warden Jackson, Assistant Warden Joe Milbern, Assistant Warden John McDaniel, Fred Cervantes, Region V Safe Prisons/PREA Manager, Kim Emsoff, Region V ACA Coordinator and Megan Kelley, Unit Safe Prisons/PREA Manager. All housing units, day rooms and all areas where offenders program and work were toured. While touring 45 random offenders and 16 random staff were informally interviewed and questioned about their knowledge of PREA.

A total of 36 staff was formally interviewed in the course of the audit. This number includes one volunteer three contract employees. This number also includes correctional officers chosen from shifts and included a combination of line staff and supervisors. The PREA Coordinator and the Agency Head Designee were not in attendance during the audit and were interviewed by James Allen, Certified PREA Auditor on an earlier date. Those interviews were shared with the auditor prior to the on-site visit. There is no SAFE or SANE staff at the facility; they are available by contract at the local hospital. Staff interviewed was well versed in their responsibilities in reporting sexual assaults and suspected sexual abuse. When questioned about evidence preservation, staff responses reflected agency policies and standard requirements.

A total of 32 formal interviews of Jordan offenders were conducted and 11 at the Baten unit. Translation services were provided by a Qualified Spanish Speaking Interpreter to assist the auditor in the interviewing of Spanish speaking offenders. Of the offenders interviewed, one was selected from each housing unit. There were no offenders with hearing loss, low visual acuity and those with special

designations (potential victim, potential predator). There was one transgender offender assigned to the Jordan unit that was interviewed and one offender who had alleged sexual abuse.

There has been two staff-on-offender allegation of abuse in the past 12 months. Administrative investigative files of both incidents were reviewed with the Unit Safe Prisons/PREA Manager. In both cases the proper procedures were followed in the handling of sexual assault/abuse allegations. Both incidents were determined to be unfounded and proper notifications of the outcome of their allegations were provided to the offenders.

At the conclusion of the on-site audit an exit meeting was held to discuss the audit findings. The following people were in attendance: Jason Heaton, Region V Director, Wren Howard, Region V Assistant Regional Director, Fred Cervantes, Region V Safe Prisons/PREA Manager, Kim Emsoff, and Region V ACA Coordinator, Senior Warden Norris Jackson, Assistant Warden Joe Milbern, Assistant Warden John McDaniel, Major Benny Bundy, Megan Kelley, Unit Safe Prisons/PREA Manager, Captains, Sergeants, several unit staff and Wardens from facilities.

### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Rufe Jordan/Bill Baten Unit is located 7 miles east of Pampa, TX on Highway 60 and 2 miles north on County Road 12 in Gray county Texas. Both units sit on approximately 1211 acres. The Jordan unit was named after Rufe Jordan who was the sheriff of Gray County for 38 years. The Jordan and Baten units are combined into one unit. The Jordan Unit is a minimum-medium security unit that was opened in 1992. The rated capacity is 1008. In 1997 the Pampa Intermediate Transfer Facility was renamed the Bill Baten Intermediate Sanctions Facility with a rated capacity of 420 offenders. On May 1, 2014 the Baten unit became a transfer facility and now houses transfer offenders only.

The Jordan and Baten units are each enclosed with one 147 feet high chain-link fence system with one to three rows of razor ribbon at the top of the fence. There are no other alarm systems built into the fence design. There is a tower on the Northeast corner of the Jordan unit outside of the secured perimeter fence that controls entrance/exit for the Jordan unit. Another tower is located on the southwest corner of the Jordan unit outside the secured perimeter fence that controls the rear sally port and has a clear view of the entrance of the Baten unit and parking lot. Both units have one zoom-pan-tilt surveillance camera that provides coverage of each of the facility entrances. The Baten unit has two additional cameras on the west side of the unit as well.

The Jordan unit has four buildings that house offenders. Each building consists of three wings; each wing has forty-two, two man occupancy cells. The Baten unit is a dormitory style facility. There are three dormitories consisting of three wings for each dormitory. The outer wings have 48 beds and the center wing of each dormitory has 42 beds.

Windham School District offers GED preparation and testing, Literacy/Reading, Changes/Pre-Release, Cognitive Intervention, and Vocational Electrical Trades. Clarendon College offers a curriculum geared toward core classes for an Associates of Applied Science degree.

The Texas Tech Health Science Services manages the medical department for both facilities providing outpatient health care services with referrals to other facilities as needed.

The mission of the Jordan/Baten Unit is to provide safety and security for staff, offenders and the public; assist victims of crime and promote positive change in offender behavior in order that they are reintegrated into society.

#### **SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded: 2  
Number of standards met: 39  
Number of standards not met: 0  
Non-applicable: 2

#### **§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Texas Department of Criminal Justice (TDCJ) Correctional Institutions Division has a Safe Prison/PREA Plan which is a written plan mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct.

Page 8, sections C and D of the Safe Prison/PREA Plan and the Safe Prisons/PREA Operations Managers 01.02 and 01.03 outline the responsibilities of the Regional Safe Prisons PREA Manager (RSPPM) and the Unit Safe Prisons PREA Manager (USPPM). In interview with the USPPM, she indicated that she has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

The TDCJ PREA Compliance Coordinator was interviewed by James Allen, Certified PREA Auditor, prior to a PREA audit he conducted. Mr. Allen shared the results of that interview and the TDCJ Compliance Coordinator indicated in that interview that he has sufficient time to manage his PREA related responsibilities.

#### **§115.12 - Contracting with other entities for the confinement of offenders**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

All contracts provide provisions for adherence to PREA standards in accordance with TDCJ policies as outlined in Administrative Directive 02.46. PREA Auditor, James Allen, shared his interview with the Agency Contract Administrator. TDCJ has a total of 15 contracted facilities (MTC, CCA, GEO) with only one that has been renewed in the past 12 months and found in

compliance with PREA standards. The other contracts are scheduled to be renewed in 2015 and are working towards compliance. The Jordan/Baten Complex is not a private facility.

### **§115.13 – Supervision and Monitoring**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prison/PREA Plan, pages 10 and 11, Section II-D, and Administrative Directive 11.52, the agency has developed, documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect offenders against sexual abuse. There have been no incidences where the staffing plan has not been complied with as confirmed by interview with the Warden. The Warden receives a shift roster each day and he reviews to ensure that the staffing plan is being adhered to. Positions are identified as category one or category two positions. Any deviations of category one positions must have the approval of the Regional Director. An Annual Staffing Plan/Turnout Roster Review was completed on 6/17/14 with the Regional Director, Warden, Warden of Security Operations, Surveillance System Coordinator and the RSPPM in attendance.

In review of page 9, section II-B, 1 & 2 and post orders of the Major, Captains, Lieutenants and Sergeants, there is a policy in place and a practice of unannounced rounds being conducted and documented. Documentation reviewed showed unannounced rounds being documented in logs in each building on all shift. This practice was confirmed by interview of offenders, correctional staff and supervisors who all reported numerous rounds being conducted on a daily basis.

### **§115.14 – Youthful Offenders**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Not Applicable

The Jordan/Baten Complex is an adult male facility and does not house youthful offenders; therefore this standard is not applicable.

### **§115.15 – Limits to Cross-Gender Viewing and Searches**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

There have been no incidences of cross-gender strip searches or cross-gender visual body cavity searches. The Safe Prisons/PREA Plan, page 9 sections II-B, 3-7 and Administrative

Directive 03.22, outline offender searches including searches of transgender and intersex offenders. The Correctional Training and Staff Development Curriculum on contraband and shakedowns, pages 11-13 outline the procedures for searches. All staff receives this training through Pre-Service and annually in In-Service training. Unit staff is required to document all cross-gender searches if they were to occur.

The facility has policies and procedures that enable offenders to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia. An e-mail from the agency's Safe Prison's Coordinator dated 4/13/14, gives the directive for the Knock and Announce policy and in the review of post orders of custody staff, the requirement of female staff announcing themselves when they enter the housing units was clearly stated. Offenders interviewed indicated that they feel they have privacy when female staff is in their housing unit.

During the facility tour, a few areas that were identified that allowed for cross gender viewing were corrected. See page 2, *Audit Findings* for more detail.

### **§115.16 – Offenders with Disabilities and Offenders who are Limited English Proficient**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The agency takes appropriate steps to ensure that offenders with disabilities and offenders that are limited English proficient have an opportunity to participate and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and harassment. The Safe Prison/PREA Plan, pages 20 & 21, section IV-A, 2 & 3 was used to verify compliance to this standard. The Safe Prisons Program Operations Manual 02.03 requires that all PREA posters, the handbook and any other written material be provided in both English and Spanish. Qualified Spanish Interpreters are utilized to convey verbal information to offenders who are limited English proficient. Certified American Sign Language Interpreter Services are available for offenders with hearing loss thru TDCJ's Assistive Disabilities Services Department. According to Administrative Directive 04.25, pages 2-4 & 8-9, the agency prohibits the use of offender interpreters, offender readers or other types of offender assistants. In interview of eight Spanish speaking offenders, they all reported receiving the PREA written information in Spanish and viewing the Spanish version of the PREA video.

### **§115.17 – Hiring and Promotion Decisions**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

In review of the Safe Prisons/PREA Plan, pages 38-40, section VIII, the agency does not hire or promote anyone who may have contact with offenders, and does not enlist the services of any

contractor who may have contact with offenders, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, 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; or has been civilly or administratively adjudicated to have engaged in the activity described above. The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor, whether they may have contact with offenders or not.

In interview with the Human Resources Manager, all criminal history checks are performed through the Criminal Justice Information System. TDCJ access is provided through the Texas Department of Public Safety (DPS). During the application process, names of employee or contractor is entered into the system, DPS provides an automatic notification by e-mail of any subsequent activity on the individual's criminal history. Annual criminal offense checks are conducted during the employee's birth month and six months after. DPS sends an electronic report to TDCJ HR Headquarters on a monthly basis. If an employee is arrested the agency receives an automatic notification at that time and this information is forwarded to the unit of assignment HR Manager. Since criminal background checks are conducted on an ongoing basis, the facility was found to exceed in this standard.

### **§115.18 – Upgrades to Facilities and Technology**

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

TDCJ's Security Operations Procedure Manual, section 07.02 states that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect offenders from sexual abuse. Currently the Jordan unit has 14 cameras in the Maintenance department that are monitored in the Maintenance Supervisor's office. There are three only three cameras at the Baten unit located at the front and back entrances and by the recreation yard. The Senior Warden shared that he is hopeful that in the future funding would allow for the installation of additional cameras to enhance safety for staff and offenders.

This standard was found to be not applicable since there have not been any new monitoring technology and have not acquired a new facility or any expansion to the existing facility since August 20, 2012.

### **§115.21 – Evidence Protocol and Forensic Medical Examinations**

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

According to the Safe Prisons/PREA Plan, Administrative Directive 16.03, and the Safe Prisons/PREA Operations Manual's Sexual Abuse Checklist, the facility follows a uniform evidence protocol that maximizes the potential for usable physical evidence for administrative and criminal prosecutions.

Victims of sexual abuse would have access to forensic medical examinations. A contract with Northwest Texas Hospital in Amarillo, Texas provides SAFE and SANE examinations without any financial cost to the offender.

The agency has attempted to solicit community rape organizations throughout the state of Texas to request victim advocacy services to its offenders with no avail. A list of national, state and local rape advocacy centers is made available to offenders through the law library. Offender Victim Representatives are available on the complex to provide emotional support to victims of sexual assault. The Safe Prisons/PREA Operations Manual, section 02.02 establishes procedures for the selection, training and functions of Offender Victim Representatives.

### **§115.22 – Policies to Ensure Referrals of Allegations for Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ Office of Inspector General 2013 Operations Manual, section #04.05, the Safe Prisons/PREA Plan, pages 27 & 28, section V-D & E and the Safe Prisons/PREA Operations Manual section 05.01, outline the agency's policy and procedure for investigating and documenting incidents of sexual abuse. Administrative Directive 16.20, attachment B, pages 7 & 8 states that all sexual assaults involving employees, visitors, volunteers or civilian on state property and all incidents of misconduct between employees and offenders must be reported immediately to OIG.

### **§115.31 – Employee Training**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The In-Service Training curriculum on Safe Prisons/PREA Program, the Gender Specific Training, the Safe Prisons/PREA Plan, pages 32-34, section IV-B and the Safe Prisons/PREA Operations Manual section 06.01 were reviewed and verified that the training provided to employees is very comprehensive and meets all elements of this standard. A Safe Prisons/PREA in Texas video is shown to all TDCJ staff that has contact with offenders at their pre-service and in-service training with all aspects of this standard addressed. This video is also utilized during staff turnout training at least once a month. Additionally, PREA posters and other information are provided in staff common areas throughout the unit. In interview with staff, they were able to confirm receiving this training and knew their responsibilities for preventing and responding to allegation of sexual abuse.

In review of documentation to verify all employees received this training, the facility could only produce rosters with employee signatures. This documentation did not reveal that the employee understood the training they received. Effective 9/26/14, TDCJ implemented an Employee Acknowledgement Form. It was recommended to the facility that this form be signed by all employees and retained. The auditor attended the second shift turnout at the Jordan unit on the second day of the audit where the PREA video was shown and all correctional staff present signed the acknowledgement form. The facility ensured all staff completed the acknowledgement form and reported its completion to the auditor via an e-mail received on October 10, 2014 from the Senior Warden of the facility. The e-mail stated that as of October 10, 2014, all employees of the facility have seen the PREA video and signed the acknowledgement form, with the exception of nine employees who are out on FMLA. The e-mail further stated that as these nine employees return to work, they will view the video and sign the acknowledgement form.

### **§115.32– Volunteer and Contractor Training**

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

Safe Prisons/PREA Plan, page 34, section IV-D and the Volunteer Training Curriculum outlines the training requirements for volunteers and contractors. Volunteers are shown a training video. The curriculum reviewed is very comprehensive with the objectives of training ensuring that volunteers and contractors are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and are informed on how to report such incidents. The agency maintains documentation confirming that volunteers and contractors understand the training they have received. An Acknowledgement of Training form is signed after each training session. This form is filed in the volunteer's file that is maintained at the TDCJ Volunteer Services office in Huntsville, TX. On interview with two volunteers, they confirmed they received and understood the training they received.

Texas Tech Health Science Services provides training to all healthcare staff. Documentation is maintained by Texas Tech of all staff receiving the training. In interview with two Texas Tech staff and one telephone contractor revealed that contractors are receiving PREA training and acknowledging their attendance by signing a roster.

### **§115.33 – Offender Education**

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

Based on the Safe Prisons/PREA Plan, page 32, section V-I, A, the Safe Prisons/PREA Operations Manual, section 02.03 and 06.02 and the TDCJ Unit Classification Procedure, 5.00, all offenders receive PREA education as part of their orientation. The Unit Orientation Outline XXI, the Offender Handbook and the TDCJ handout, page 21, provided during the intake process, as well as a video for offenders on PREA information provide offenders information

explaining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of both. All information presented is provided in both English and Spanish and to offenders who have low vision or hearing or with limited reading skills in a manner they can understand. Documentation is maintained of offender participation in these education sessions. Formal and informal interviews with offenders indicated that they have an understanding of the training they received.

Educational posters regarding sexual abuse and harassment prevention were prominently displayed throughout the unit in both Spanish and English.

### **§115.34 – Specialized Training: Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Investigation Training entitled "Conducting a Thorough Investigation", the unit's investigative staff receives a three-hour training course in addition to the general education provided to all employees. This training includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection and information to substantiate a case for administrative or criminal prosecution. TDCJ Office of the Inspector General 2013 Operations Procedure Manual 02.15 and 04.05 outlines requirements for OIG investigators responsible for criminal investigation. OIG investigators receive a 32-hour training covering interviewing and interrogation techniques and on sexual assault investigation topics. Sergeants and above are responsible for conducting offender-on-offender investigations and Captains and above, staff-on-offender investigations. OIG is responsible for conducting criminal investigations. On interview with Sergeants, Captain, Major and Assistant Warden as well as the OIG investigator, this training is being provided and they are knowledgeable of their responsibilities in conducting investigations.

### **§115.35 – Specialized training: Medical and mental health care**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The agency ensures that all medical and mental health staff has training on how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and harassment. Texas Tech Health Science Services provides this training their staff. A PREA training PowerPoint presentation was reviewed and was very comprehensive. The facility maintains documentation that all medical and mental health practitioners have received this training.

The facility medical staff does not conduct forensic examinations. SAFE and SANE exams are conducted at the Northwest Texas Hospital in Amarillo, Texas.

## §115.41 – Screening for Risk of Victimization and Abusiveness

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ's Safe Prisons/PREA Operational Manual, section 03.01 and the Safe Prisons/PREA Plan, pages 16-18, section III, A & B, outline the procedures for conducting offender screenings. A Screening form reviewed prior to the on-site visit indicated that all criteria to assess offenders for risk of sexual victimization were included on the form. Not included on the form was the screener's perception of whether the offender appeared to be gender non-conforming although this information was included in the procedures provided in the Safe Prisons/PREA Operations Manual, section 03.01, page 3, section II-E. TDCJ had implemented a revised screening form dated 9/2014. The facility obtained a copy of the revised screening form and began using the form during the audit. The auditor observed the intake of one offender on the second day of the audit and found the new form was being used. Offenders may not be disciplined for refusing to answer any questions or for not disclosing complete information. An offender's risk level will be reassessed when based on any additional, relevant information received by the facility since the intake screening. The Unit Safe Prisons/PREA Manager is responsible for conducting all intake screenings with assistance from the STG officer as needed. Intake records are filed in Offender Records with sergeants and above and the Unit Safe Prisons/PREA Manager allowed access to them.

## §115.42 – Use of Screening Information

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Plan, page 18 & 19, section III-C, the Safe Prisons/PREA Operations Manual, section 03.01 and Administrative Directives 04.17 and 04.18, the agency uses the information from the risk screening form to make housing bed, work, education and program assignments with the goal of separating offenders at high risk of being sexually victimized from offenders with those at high risk of being sexually abusive.

In review of Correctional Managed Health Care Policy G-51.11 and TDCJ Safe Prisons/PREA Operation Manual, section 03.02, guidelines are provided for the management of transgender and intersex offenders. Placement and programming assignments for each transgender or intersex offenders are reassessed at a minimum of twice each year to review any threats to their safety. Transgender and intersex offenders are given the opportunity to shower separately from other offenders.

The agency does not place lesbian, gay, bisexual, transgender, or intersex offenders in dedicated facilities, units or wings solely on the basis of such identification. On interview with

the only transgender offender on the unit, he is housed in general population and has not ever been placed in any special housing unit because of this sexual orientation.

### **§115.43 – Protective Custody**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Plan, pages 18 & 19, section III-C, 3-7, offenders at high risk for sexual victimization shall not be placed in protective custody unless an assessment of all available alternatives has been made and it is determined there is no available alternative means of separation from likely abusers. Offenders shall be assigned to protective custody only until an alternative means of separation from likely abusers is arranged, for no longer than 30 days. If separation continues past 30 days, every 30 days the unit will conduct a review to determine if there is a continuing need for separation of the offender from the general population. There have been no incidents of offenders who were screened at risk of sexual victimization were placed in involuntary segregated housing in the past 12 months. On interview with the Senior Warden and correctional staff who work in segregated housing, compliance to this standard was verified.

TDCJ Administrative Segregation Plan section on In-Cell Programming, page 22, section IV-J, K, L, outlines the limitations of in cell programming.

### **§115.51 – Offender Reporting**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Safe Prisons/PREA Plan, pages 20-23, section IV-A and TDCJ Executive Directive, ED-02.10 outline the procedures on offender reporting. The agency provides multiple ways for offenders to privately report sexual abuse and sexual harassment and retaliation by other offenders or staff for reporting sexual abuse and sexual harassment. Offenders are made aware of how to contact OIG and the PREA Ombudsman through posters, the Offender Handbook and a TDCJ Brochure. The agency's policy mandates that staff accept all reports of sexual assault and sexual harassment made verbally, in writing, anonymously and from third parties. Staff and offenders interviews verified that they are aware that they can report verbally, in writing or through a report of a third party. Staff also verified that they have access to private reporting.

The Texas Department of Criminal Justice (TDCJ) does not detain individuals solely for civil immigration purposes.

## **§115.52 – Exhaustion of Administrative Remedies**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

In review of the Safe Prisons/PREA Plan, pages 21-23, section IV-A, 5-14, the agency policy provides procedures for offenders to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. The policy states that there is no timeline for filing regardless of when the alleged incident occurred. Offenders are not required to use the informal grievance process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse. 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 a grievance. An offender may file an emergency grievance alleging risk of imminent sexual abuse. In the past 12 months there were four grievances filed alleging sexual abuse. In review of two of those grievances and on discussion with the unit's Grievance Coordinator, all elements of this standard are in compliance.

## **§115.53 – Offender Access to Outside Confidential Support Services**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The agency has attempted to solicit community rape organizations throughout the state of Texas to request victim advocacy services to its offenders with no avail. A list of national, state and local rape crisis centers is made available to offenders through the law library. Offender Victim Representatives are available on the complex to provide emotional support to victims of sexual assault. The Safe Prisons/PREA Operations Manual, section 02.02 establishes procedures for the selection, training and functions of Offender Victim Representatives.

The lists of rape crisis centers that are provided to the offenders in the law library list the agencies mailing addresses and telephone numbers. The offenders are not allowed to telephone these agencies, so initially this standard was not met. The question was raised to the PREA Resource Center as to how the facility could come into compliance with this standard. Since attempts are being made to secure an MOU for outside advocacy services throughout the state of Texas, the PREA Resource Center responded that if all offenders are made aware of the availability of this list and if correspondence to any of these resources could be sealed and remains confidential, the standard would be met. In discussion with the Senior Warden following the response from the PREA Resource Center, the Regional Director has ruled that mail to any of these outside agencies will be considered special mail and can be sealed by the offender to remain confidential. Offenders are informed of the availability of this list during their orientation to the facility as part of their PREA training. This training now will include informing the offenders that correspondence with these agencies will remain confidential.

### **§115.54 – Third-Party Reporting**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Plan, page 23, section IV-B, the agency has a method to receive third party reports of sexual abuse and sexual harassment. Family members or other individuals may report verbally or in writing to unit administration, the TDCJ Ombudsman office, OIG or PREA Ombudsman office any time they have knowledge or suspect an offender has been sexually abused, sexually harassed or requires protection. The TDCJ Executive Directive, 02.03 provides guidelines for the management of the Ombudsman program and their process to responding to complaints. A General Information for Families of Offenders brochure addresses the PREA Ombudsman program and families are provided the address, phone numbers and website to contact that office to report sexual abuse and sexual harassment on behalf of an offender. This brochure is available on the TDCJ website. Offenders, when interviewed, were aware of this method of reporting.

### **§115.61 – Staff and Agency Reporting Duties**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Safe Prisons/PREA Plan, page 23, section IV-B and the Correctional Managed Health Care policy E-35/2 and G-57.1 were reviewed to verify compliance to this standard. Policies required that all staff are required to report immediately any knowledge or information regarding an incident of sexual abuse or sexual harassment. According to Administrative Directive 16.20, the facility reports all allegations of sexual abuse and sexual harassment to OIG. Random interviews with staff revealed that staff is very aware of their responsibilities to report incidents of sexual abuse or harassment and know not to reveal any information about a sexual abuse incident to anyone other than to the extent necessary.

### **§115.62 – Agency Protection Duties**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

When the agency learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the offender. TDCJ Safe Prisons/PREA Plan outlines the agency's procedures related to offender-on-offender and staff-on-offender sexual abuse incidents. In interview with the Senior Warden, there have been no incidents in the past 12 months where it was necessary for the agency to take any action in regards to an offender

being in substantial risk of sexual abuse and he was aware of the actions to be taken if this were to occur.

### **§115.63 – Reporting to Other Confinement Facilities**

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

TDCJ Safe Prisons/PREA Operations Manual, section 04.01 and the Safe Prisons/PREA plan, page 24 & 25, section IV-D, requires when a sexual abuse allegation that an offender was sexually abused while confined to another facility, the Warden of the facility that received the allegation shall immediately notify the PREA Ombudsman. If an individual other than the Warden receives this information, they are required to immediately notify the Unit Safe Prisons PREA Manager who will relay this information to the Safe Prison PREA Management Office.

The Jordan/Baten units have not received allegations from other facilities pertaining to sexual abuse for the past 12 months. The Senior Warden stated in interview what procedure he would follow if this were to occur. The Agency Head Designee, The TDCJ PREA Compliance Coordinator, William Stephens, interviewed by auditor James Allen, stated that the designated point of contact for this information is the PREA Coordinator. The Senior Warden, the Unit Safe Prisons/PREA Manager and staff responsible for investigations immediately begin an investigation.

### **§115.64 – Staff First Responder Duties**

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

Administrative Directive 16.03, TDCJ OIG 2013 Operations Manual, section 04.05 and the Safe Prisons/PREA Operations Manual outlines the procedures for first responders to an allegation of sexual abuse whether that person is a security or non-security staff member. Random interviews with security and non-security staff revealed that they knew the policy and practice to follow. They reported that they knew that the alleged victim and abuser must be separated, how to preserve the crime scene and evidence. There have been no allegations in the past 12 months that required collection of physical evidence.

### **§115.65 – Coordinated Response**

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

The Safe Prisons/PREA Plan, page 26 sections V-5, g and the Safe Prisons/PREA Operations Manual section 05.01, were used to verify that there is a plan to coordinate actions taken in response to an incident of sexual abuse. Interviews with specialized staff confirmed that they are knowledgeable of the plan and the necessary actions to be taken.

### **§115.66 – Preservation of ability to protect offenders from contact with abusers**

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

TDCJU's PD-29, PD-22 and PD-35 all outline employee rules of conduct and disciplinary actions for employees that violate these rules which includes sexual misconduct. The agency has the ability to remove alleged employee sexual abusers from contact with offenders pending the outcome of an investigation which could result in sanctions up to and including termination.

There has been no collective bargaining agreements entered into.

### **§115.67 – Agency protection against retaliation**

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

The agency has policies in place to ensure that there is no retaliation against any offender or staff member who report sexual abuse or sexual harassment. The Safe Prisons/PREA Operations Manual, section 05.08 details provisions for 90-day monitoring of staff by the Senior Warden and for offenders by the Unit Safe Prisons/PREA Manager with continued monitoring beyond 90 days if the Senior Warden, offender, staff member or PREA Manager feel additional monitoring is warranted. There have been no incidents of retaliation occurring in the past 12 months. Both the Senior Warden and the Unit Safe Prisons/PREA Manager explained their role in preventing retaliation and what measures they take to protect offenders and staff from retaliation.

### **§115.68 – Post-Allegation Protective Custody**

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

The agency prohibits offenders who have alleged sexual abuse to be placed in involuntary segregated housing. If segregated housing was used, the same provisions as outlined in the Safe Prisons/PREA Plan, pages 18 & 19, section III-C, 3-7 and referenced in standard 115.43 would apply. Interview with the Senior Warden and segregation staff revealed that involuntary segregation has not been used for this purpose.

### **§115.71 – Criminal and Administrative Agency Investigations**

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

The agency and facility have policies governing administrative and criminal investigations of sexual abuse. OIG is the investigative organization for all TDCJ criminal offenses including sexual abuse investigations. Facility investigators conduct investigations immediately when notified of an allegation of abuse. Interviews with the unit staff responsible for investigations and the OIG Investigator, has received special training. Secondary documentation provided in support of this standard showed that OIG conducts criminal investigations do so pursuant to the requirements of this standard. There were no sexual abuse allegations referred for prosecution in the past year.

### **§115.72 – Evidentiary Standard for Administrative Investigations**

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

According to the Safe Prisons/PREA Plan, page 28, section V-D-5, the agency shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. When unit staff responsible for investigations were asked what standard of evidence was used in determining if an allegation is substantiated, they confirmed the agency policy.

### **§115.73 – Reporting to Offender**

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

The Safe Prisons/PREA Operations Manual section 05.10 and the Safe Prisons/PREA Plan, page 30, section V-F-4 were used to verify compliance to this standard. The policies indicate that the intent of the standard requirements if the allegation proves to be substantiated, unsubstantiated or unfounded providing proper notification to the offender as per this standard. Based on interview with the Senior Warden and the Unit Safe Prisons/PREA Manager, this process is in place and required notifications are well documented. In the two allegations of

abuse that were reported in the past 12 months, review of unit investigative files showed compliance to this standard.

### **§115.76 – Disciplinary sanctions for staff**

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

Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policies. Staff is informed of these policies in the TDCJ PD-22, "General Rules of Conduct and Disciplinary Action Guidelines for Employees" and in the TDCJ Addendum to PD-29, "Sexual Misconduct with Offenders". In the past 12 months there have been no staff that have been terminated or resigned prior to termination for violating agency sexual abuse or sexual harassment policies.

### **§115.77 – Corrective action for contractors and volunteers**

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

In the Safe Prisons/PREA Plan, page 39, section VIII-B and the Volunteer Service Plan, page 23, section VIII-2, volunteers and contractors are prohibited from contact with offenders and will be reported to the law enforcement agency. In interview with the Senior Warden, there have been no incidences of sexual abuse by contractors or volunteers. If it were to occur, appropriate remedial actions would be taken.

### **§115.78 – Disciplinary sanctions for offenders**

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

The Safe Prisons/PREA Plan, pages 30 & 31, section V-H, and the TDCJ "Disciplinary Rules and Procedures for Offenders" were used to verify compliance to this standard. Offenders will face disciplinary sanctions through the disciplinary process if they violate the agency's zero-tolerance policy which prohibits offender-on-offender sexual abuse. Offenders who engage in sexual misconduct with staff are disciplined if it is found that the staff member did not consent to such contact. In the past 12 months there have been no offender-on-offender reports of sexual abuse.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Upon intake, any offender reporting any prior victimization or any offender who previously perpetrated sexual abuse is seen by mental health staff. The Unit Safe Prisons/PREA Manager responsible for intake screening and the Health Services Administrator that were interviewed verified this process was in place. Informed consent is obtained from offender before reporting about prior sexual victimization that did not occur in an institutional setting. Correctional Managed Health Care policy G-57.1 provides for immediate evaluation by mental health staff of offenders who report sexual assault and a physical exam will be performed in all cases of sexual assault.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Correctional Managed Health Care policy G-57.1, the Safe Prisons/PREA Plan, page 13, section II-F and the Safe Prisons/PREA Operations Manual, section 05.01 mandate that offenders who are victims of sexual abuse have immediate access to medical and mental health services and crisis intervention services. Security staff escorts the alleged victim to the medical department immediately for a physical examination. The facility contracts with the Northwest Texas Hospital in Amarillo, Texas for SAFE and SANE examinations with no cost to the offender for these examinations. Interview with the Health Services Administrator confirmed this practice. The Jordan/Baten unit has not had sexual abuse allegations reported in the past 12 months that required emergency medical or mental health services.

### **§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Safe Prisons/PREA Plan, page 14, section II-G, and the Correctional Managed Health Care policy G-57.1, and interview with the Health Services Administrator were used to verify compliance to this standard. The facility offers medical and mental health evaluation and treatment to all offenders who have been victimized by sexual abuse. Victims will be offered prophylactic treatment and follow-up for sexually transmitted diseases, counseling and testing and are referred to the mental health staff for crisis intervention as necessary. Services are provided at no cost to the offender.

### **§115.86 – Sexual abuse incident reviews**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Plan, page 31, section I, and on interview the Senior Warden, Unit Safe Prisons/PREA Manager, the Assistant Warden and a Captain, who are all members of the Incident Review Team, the facility is required to conduct a sexual abuse incident review for every sexual abuse investigation. The Unit Safe Prisons/PREA Manager prepares a monthly report which includes offender PREA training, frequency of Offender Protection Investigations and monthly activity related to allegations of sexual abuse. To date there have been no founded sexual abuse cases to review.

### **§115.87 – Data Collection**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The TDCJ Board Policy 02.09 designates the PREA Ombudsman as the person who oversees and collects data on allegations of sexual abuse, unless determined to be unfounded, from each correctional facility in the state and reports this information to the TDCJ executive management monthly and semi-annually. This information is compiled and made available on the TDCJ website annually.

### **§115.88 – Data Review for Corrective Action**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on the Safe Prisons/PREA Plan, page 26, section VII-B and on interview with the Safe Prisons/PREA Manager, the agency reviews all of the data collected from all its facilities and aggregates that data at annually to assess and improve the effectiveness of its sexual abuse program and practices. The Annual PREA Report is made available on the TDCJ website.

### **§§115.89 – Data Storage, Publication, and Destruction**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The agency ensures that the data collected is securely retained. According to the TDCJ Record Retention Schedule, Criminal Investigation Case files, Sexual Abuse Investigation Checklists and Offender Protection Investigation Summaries must be permanently retained.

**AUDITOR CERTIFICATION:**

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

Barbara Jo Denison

October 24, 2014

Auditor Signature

Date