

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: February 13, 2016

Auditor Information			
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Date of facility visit: January 12-15, 2016			
Facility name: Lynaugh-Ft. Stockton Unit			
Facility physical address: 1098 South Hwy. 2037, Stockton, TX 79735			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: 432-395-2938			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Glen H. Whitfield			
Number of staff assigned to the facility in the last 12 months: Lynaugh 405; Ft. Stockton 116			
Designed facility capacity: Lynaugh 1416; Ft. Stockton 606			
Current population of facility: Lynaugh 1407; Ft. Stockton 602			
Facility security levels/inmate custody levels: Minimum, medium (TDCJ grades G1,G2, G4, and transient)			
Age range of the population: 18 - 77			
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AUDIT FINDINGS

NARRATIVE

A Prison Rape Elimination Act (PREA) audit was scheduled by the American Correctional Association, (ACA) and the Texas Department of Criminal Justice (TDCJ) for the Lynaugh-Fort Stockton Unit(s), with a tour and site visit, beginning January 13-15, 2016. Initial notification of the PREA certified auditors, Cherie Peay and James Curington (lead), was made in November 2015, by the ACA, advising the auditors to establish an agenda, schedule transportation/on-site visit and prepare a pre-audit form for the PREA Resource Center (PRC).

The audit process began with necessary and appropriate notifications and postings, exchange of information, and contacts. The ACA contacted the two certified PREA auditors with schedules, assignments, letters and some facility information. The TDCJ contacted the auditors with information concerning the facility and PREA compliance (see the following paragraph). The Warden and the unit, contacted the lead auditor assisting with logistical details and local information. The auditors submitted their written daily agenda to the agency prior to the on-site visit. The auditors also communicated with each other, sharing information, the Pre-Audit Questionnaire, and their plans for the assessment of each of the 43 PREA standards.

The TDCJ Office of Administrative Review and Risk Management furnished the lead auditor a thumb drive containing substantial information. The information consisted of the Pre-Audit Questionnaire with downloadable/uploadable information; supporting documents, 37 documents (from the most recent ACA audit report to placement of video camera locations) of varying page length; and the Master Folder containing subfolders of all 43 PREA standards and scripted interviews from the Agency Head, the Agency Contract Administrator, and the Agency PREA Coordinator. Special thanks is extended to the Lynaugh-Ft. Stockton Unit(s) and the Office of Administrative Review and Risk Management for this compilation of unit and agency information to assist the auditors in assessing PREA compliance. The auditors reviewed materials and information submitted prior to the on-site visit.

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

Thus began the audit process and establishing the methodology through the daily on-site agenda, the Audit Instrument; personal contacts and the systematic review of materials, documents, policies, procedures, and information for the PREA auditors. The abbreviated agenda for the on-site visit/ tour is outlined as follows:

Tuesday, January 12 – visit the Ft. Stockton Unit, and meet with key staff at the Pecos County Memorial hospital;

Wednesday, January 13 – visit and tour the Lynaugh Unit begin interviews with staff and inmates;

Thursday, January 14 – visit and tour the Ft. Stockton Unit and revisit the Lynaugh Unit, attend shift briefing/turnouts and continue interviews; all areas of the facility were visited.

Friday, January 15 – visit and tour the Lynaugh Unit, interview staff and inmates, then meet with key staff from both units, including the Warden and Regional Director.

Total number of formal interviews with inmates were 59, additionally many informal interviews were also conducted with the inmate population. Inmates from every housing unit (auditors used housing unit count as 5 for Lynaugh and 19 for Ft. Stockton) were interviewed. Total number of formal interviews with random staff were 22. There were 16 formal interviews with specialized staff, and numerous informal interviews were also conducted with staff.

After completion of the on-site visit Friday, January 15, the auditors explained that an interim/final report would be completed within 30 days. The report would be final if all applicable standards were compliant (no non-compliances).

This completed the pre-audit review, interview, observation, and on-site/tour portions of the audit, pending final review and the auditor's summary report.

This summary is the final report and the two certified PREA auditors attest to compliance of the applicable PREA standards by the TDCJ Lynaugh-Ft. Stockton Unit(s). Facility description (including Mission Statement and demographics), and the summary of the auditor findings follows in this final report.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Lynaugh-Fort Stockton Unit(s) is a dual/2 facility Unit of the TDCJ with the Ft. Stockton Unit (N-5 Unit) located in the city of Fort Stockton and the Lynaugh Unit located about 15 miles southwest of the city of Fort Stockton. This is an all-male, minimum/medium security correctional facility.

The Lynaugh Unit is the larger of the two units with a maximum capacity of 1416 inmates. This facility was established in September 1994 and named in honor of Mr. James A. Lynaugh, a former Executive Director of the Texas Department of Criminal Justice. This unit is situated on approximately 1313 acres with an additional 1503 leased acres. Unit programs include agricultural operations, facility operations, educational programs, faith-based programs, reentry planning, substance abuse education, volunteers, support groups and self-improvement programs, and the daily work/job assignments for the inmate population, and maintenance and operation of the facility.

The Ft. Stockton Unit, the smaller the two units consisting of 606 beds, was established in July 1992 as a pre-parole release facility and is situated on approximately 25 acres in the city of Fort Stockton. Unit programs include work/job assignments for the facility operation and maintenance, services to the City and County agencies, religious/faith-based studies and activities, and educational programming.

To quote the introductory auditor handbook, the Lynaugh-Ft. Stockton Unit(s) has "continued to evolve in its mission to keep safe the public, staff and offenders and to take care of resources given by the state of Texas for its vital assignment. In its 15 years it has contributed to a healthier economy in Pecos County, providing citizens not only salaries but retirement benefits and healthcare provisions that many local citizens had not previously experienced. Currently it is the largest employer in the Ft. Stockton area".

This PREA audit was assisted by the facility PREA Managers, Ms. Heather Lopez and Ms. Melissa Gutierrez working for and reporting PREA initiatives/compliance directly to the Senior Warden, Glen H. Whitfield. Their professionalism, hard work, and commitment to PREA compliance is noted, appreciated and valued.

Mission Statement

"It is the mission of the Lynaugh/Fort Stockton Units to the best of our ability, to confine adult felons of the state of Texas by supporting the rehabilitation opportunities in the areas of education, healthcare, and treatment program; to be responsible to the citizens of our community with respect to the safety and fiscal responsibility; and to maintain a safe and secure environment for all associated with the facility."

DEMOGRAPHICS

Designated facility capacity: 2021; Lynaugh Unit 1416; Ft. Stockton Unit (N-5) 606

Actual population at the time of the audit; Lynaugh 1407; Ft. Stockton 602

Gender; male

Age range of population; 18 – 77 years

Security; minimum, medium (TDCJ grades, G1, G2, G4 at Lynaugh and G1, G2, transient at Ft. Stockton
80+% G2, medium custody)

Number of staff: Lynaugh Unit, 405 total; 301 Security, 17 Health Services, 8 Education, 79 Other
Ft. Stockton Unit, 116 total; 85 Security, 6 Health Services, 3 Education, 22 Other

The Lynaugh-Ft. Stockton Unit(s) is an ACA accredited, Adult Correctional Institution (ACI) facility.

SUMMARY OF AUDIT FINDINGS

The Lynaugh-Ft. Stockton Units were assessed as in compliance with PREA standards, and this is a final report. As listed below, 40 of the 43 standards met compliance and 3 were not applicable (115.12 Contracts, 115.14 Youthful Offenders, 115.66 Preservation of Ability to Protect).

Number of standards exceeded: 1

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 3

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

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

The Texas Department of Criminal Justice has a Safe Prisons Policy which was developed to prevent, detect and respond to sexual abuse and sexual harassment. The policy includes definitions, sanctions, strategies and "zero tolerance". This policy, which was revised in August 2014, consists of approximately 40 pages. In addition to this policy, the TDCJ has a Safe Prisons/PREA Operations Manual (SPPOM) which addresses administration, intervention, assessment screening, reporting and receiving allegations, investigations, training records, transfers, reporting, and has numerous attachments to assist with agency strategies, agency wide coordination, responses, prevention, and detection regarding sexual assault and sexual harassment. The TDCJ describes its policy, plan and manual as being "essential to the operation of this Safe Prisons/PREA Operations Program and shall be adhered to at all times to ensure continuity and professionalism throughout the system". The agency has designated Mr. William Stephens, Director Correctional Institutions Division as the Agency-wide PREA Coordinator. The scripted interviews with the Coordinator indicated that he has sufficient time to develop, implement and oversee the agency's efforts to comply with PREA standards.

The Lynaugh-Ft Stockton Unit PREA Manager is Ms. Heather Lopez who is assisted by Ms. Melissa Gutierrez. Both staff were interviewed by the PREA auditors and the interviews indicate that they there have sufficient time to coordinate the Unit's efforts to comply with PREA and are so designated within the organizational structure.

The PREA auditors reviewed the policies outlined in the Safe Prisons/PREA Plan, the Executive Directive Policy 03.03 referencing the appointment of the Agency Coordinator and Unit Manager(s), and the Safe Prisons/PREA Operations Manual. Additional documentation, including the agency's organizational chart, the unit's organizational chart and the zero tolerance PREA postings were also reviewed by the auditors.

These reviews mentioned above, interviews with specialized staff, and random interviews of staff and inmates confirmed the two auditors' assessment of Unit compliance with this initial standard.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

This standard is not applicable based on the assessment by the auditors that the Unit does not contract for the confinement of inmates with private agencies or other entities. (The TDCJ, as an agency, contracts with private agencies or other entities for the confinement of inmates and does require PREA compliance and has been found in compliance with this standard.)

Standard 115.13 Supervision and monitoring

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

- Does Not Meet Standard (requires corrective action)

The Lynaugh-Ft Stockton Unit(s) is a medium security facility with appropriate staffing and perimeter security. The Warden and his staff, including the Human Resource Departments comprehensive involvement, has assured staffing according to the needs and priorities of the Unit and Agency. The Warden and his key staff routinely review the staffing plan, recruitment policies, and institutional needs to assure the safety of staff and inmates. There are few vacancies at the Unit(s).

Higher-level staff conduct unannounced rounds to identify any deviation from policy and procedure, and specifically for any deviation from the agency PREA policy.

The Warden personally reviews any deviation from compliance with the minimum staffing pattern established for the facility.

The Security Operations Manual and Correctional Officer Post Orders, both address supervision duties and responsibilities including unannounced rounds. Staff compliance with the manual and post orders is maintained not only through regular and unannounced rounds, but also through incident reviews, logs, reports, and daily operational procedures.

Video cameras are strategically located throughout the Unit(s). Cameras are appropriately monitored and recordings are made, consistent with policy (generally 30 days). Staff routinely checks for blind spots which, if they exist, are evaluated and secured or appropriately monitored through rearranged sightlines, mirrors, staffing, or video enhancement.

Based on specialized staff interviews, the facility tour/observation, video review, and the review of officer logs and supervisory rounds, the auditors assess compliance.

Standard 115.14 Youthful inmates

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

There are no youthful offender inmates at the Lynaugh-Ft. Stockton Unit(s).

Standard 115.15 Limits to cross-gender viewing and searches

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

Policy and procedures governing cross gender viewing and searches were reviewed by the auditors as well as actual searches conducted during the audit on-site visit. Policy does allow cross gender strip and cross gender visual body cavity searches of inmates in emergency situations, however, no cross gender viewing or searches are conducted absent exigent circumstances. Safe Prisons/PREA Plan outlines the agency policy.

Procedures require that staff of the opposite gender announce their presence when entering inmate housing, and this was observed. It was discussed several times that the idea of simple courtesy and limited privacy could be extended in inmate housing without jeopardizing security. Security is always first. Documentation on body cavity searches, pre-service and in-service training of staff, and the Safe Prisons/PREA Operational Manual, 02.05 was reviewed by the auditors. Lynaugh-Ft, Stockton Unit(s) is an all-male facility.

All staff received the appropriate training, reinforced through shift briefing/turnout training as observed by the auditors.

Based on staff and inmate interviews, which confirmed that inmates can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them, and based on the policies, documentation, and observations by the auditors during the tour and revisits to the facility compounds this standard was assessed as being compliant with PREA law/standards.

Special note, both PREA auditors reviewed this standard on limits to cross gender viewing and searches as compliant, however, the auditors felt at the minimum/medium security N-5 Ft. Stockton Unit, an enhanced viewing procedure and common courtesy could be established in the small dorms by separating the 3 small dorm commodes from the sleeping bunks by a 3-3 1/2 ft. wall (similar to the 3-3 1/2 ft. wall separating the commodes from the bunks in J-5 dorm at the Lynaugh unit).

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

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

Lynaugh-Ft Stockton Unit(s) has implemented policies and procedures to provide disabled inmates equal opportunity to participate in benefits from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Unit(s) has also established procedures to provide inmates with limited English proficiency this same equal opportunity.

The TDCJ, through Administrative Directives 04.25 and 06.25 addresses interpreter services, American Sign Language services, and inmates who are limited in English proficiency. Additionally, Correctional Mental Health Services, through policies CMHC, G-51.1 and G-51.5, addresses offenders with special needs. The facility has implemented and uses staff interpretive services, and appropriate mental health services to make sure all inmates benefit from the agency's efforts to prevent and respond to sexual abuse and sexual harassment.

There are 42 trained interpreters at the Lynaugh Unit and 28 trained interpreters at the Ft. Stockton Unit.

The auditors observed during the tour, and from interviews with staff and inmates, that there were numerous bilingual and multilingual staff and inmates at the facility. There seemed to be no difficulty in language communications between staff and inmates. Staff was readily available for any interpretation needed by the auditors.

Agency policy prohibits the use of interpreters or other types of inmate assistants except in limited circumstances.

In the past 12 months, there have been zero (0) number of inmate interpreters used, and there has been no delay in use of staff assistance.

The auditors, based on review of the policies and procedures mentioned above and based on the auditors' review of the PREA videos (English and Spanish) and the offender, special needs training find this standard in compliance.

Standard 115.17 Hiring and promotion decisions

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

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

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

Specifically; Personnel Policies/Personnel Directives PD-22 General Rules of Conduct, PD-27 Employee Status, PD-29 Sexual Misconduct, PD-56 Request for Release of Information, PD-71 Selection System Procedure, PD-73 Selection Criteria, and PD-75 Pending Charges were reviewed. These policies, the Safe Prisons/PREA Plan, personnel forms, and the Texas Code 552.023 were all reviewed by the two PREA auditors.

Background checks are conducted on all newly hired staff (or serious applicants). In the past 12 months, there have been 138 background checks accomplished by the Unit(s). There have been two (2) background checks completed for contractors, who have (or may have) contact with inmates.

Routine criminal background checks are made at least every five years for current employees.

The auditors find this standard in compliance based on the policies and procedures outlined above and the interviews with specialized staff, including Human Resources staff and the Warden.

Standard 115.18 Upgrades to facilities and technologies

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

According to the Pre-Audit Questionnaire, the Lynaugh-Ft. Stockton Unit(s) has made not any substantial expansions or modifications of existing facilities since August 20, 2012, but has made some minor modifications.

The facility has not installed a new video monitoring system and electronic surveillance system since August 20, 2012, according to the Pre-Audit Questionnaire, but some minor updating has been made.

The Institution constantly evaluates its camera technology and is considering requests for expanded and updated maintenance and expanded video enhancement.

Based on the auditors' review of the facility's monitoring and use of 81 cameras at the Lynaugh Unit and monitoring and use of 47 cameras at the Ft. Stockton Unit, the auditors evaluated the monitoring and use of this technology and then assessed this standard as compliant.

Information on video cameras was taken from institutional supporting documents submitted on the thumb drive to the auditors (i.e. Physical Plant video monitoring locations at the Lynaugh Unit, Physical Plant video monitoring locations at the Ft. Stockton Unit) and from photos and work orders for video equipment.

Standard 115.21 Evidence protocol and forensic medical examinations

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

TDCJ is responsible for administrative and criminal sexual abuse investigations. The Safe Prison/PREA Operations Manual, SPPOM, 02.02, 05.01, assures investigators follow a uniform evidence protocol through the use of this operational memorandum and the Sexual Abuse Checklist.

Corrections Managed Healthcare Policy, CMHC G-57.1 also stipulates the appropriate forensic medical examinations.

Emergency medical healthcare is provided by the Pecos County Memorial Hospital in Fort Stockton, Texas.

Forensic medical exams are directed by policy to be at an outside hospital. Policy also directs SAFE or SANE staff to administer the forensic examination.

Based on a review of sections a-h of this standard, interviews with investigative staff, health care staff, a visit to the local hospital including interviews with the Director of the Emergency Room and the Director of Nursing, review of documents including the Rape Crisis Center template letter, the National, State and local Rape Advocacy Centers listing and the lists of Offender Victim Representatives (OVR) at the Unit(s), the auditors' find an assessment of compliance for this standard.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

The Lynaugh-Ft. Stockton Unit(s) adheres to and follows the TDCJ policies ensuring that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

Administrative Directives AD-02.15, & AD-16.20 Operations of the Emergency Action Center (EAC) and Reporting Procedures to the Office of the Inspector General (OIG) outline the necessity and immediacy of reporting incidents and crimes to EAC and OIG. The Safe Prisons/PREA Plan and SPPOM also outline sexual abuse investigation and offender protection investigation which are also explained/outlined for the inmates in the offender orientation. (This, from the SPPOM 05.01 & 05.05).

Interviews with investigative staff, random staff, and inmates indicate knowledge and familiarity with policies and procedures. Furthermore, pocket information cards, distributed to staff, outline procedures to assist with reporting abuse and establishing the basis for investigation. There were 15 allegations of sexual abuse and sexual harassment that were received in the last 12 months. Of these, 15 resulted in administrative investigation, and six (6) of these 15 were referred for criminal investigation. These numbers taken from the institutional Pre-Audit Questionnaire, review of these referrals were made by the auditors.

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

The auditors' confirm compliance with this standard based on review of these investigations and documents, as well as interviews with specialized staff, including telephonic interviews with investigators.

Standard 115.31 Employee training

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

Training records, staff interviews and curriculum review indicated that staff at the Lynaugh-Ft. Stockton Unit(s) were all well-trained in PREA. Staff are knowledgeable about the Zero Tolerance Policy for sexual abuse and sexual harassment. They were knowledgeable on how to perform their responsibilities in detection, reporting, and responding. Staff have received pocket information guides outlining pertinent information concerning PREA. It was evident to the auditors, from the initial greeting through the tour and on-site visit, that staff, volunteers, and contractors have been trained in PREA, and that there was a focus and team effort in completing a successful PREA compliance audit.

An "exceeds" standard is assessed based on the training in turnout/shift briefings sessions, by the videos prepared at the highest levels in the TDCJ, the efforts made by the Warden and his personal review of each of the PREA standards, and the team effort displayed by the staff. This exceeds is further supplemented not only by the training and policies, but by the interviews with random and specialized staff and the auditors personal contact with staff throughout the on-site visit.

Additionally, the auditors found the enthusiasm and professionalism displayed by the Sergeants and key staff, as well as the efforts by staff to afford safety to the inmate population contributed to the assessment of exceeds compliance of this standard.

Standard 115.32 Volunteer and contractor training

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

All volunteers and contractors who have contact with inmates have been trained in their responsibility under TDCJ's policies which include procedures regarding prevention, detection and response of sexual abuse and sexual harassment. The emphasis on volunteer and contractor training can be recognized in the efforts made by TDCJ leadership in the Central Office who have established a Volunteer Service Plan and a Handbook for Volunteers which is available on the public website.

A special training video has been established to educate volunteers who assist the Texas Department of Criminal Justice. This video is shown to each of the volunteers and they acknowledge that they understand and have received this additional appropriate training.

Based on the auditors' interviews of contractors and volunteers, and based on the auditors' review of the Volunteer Services Plan, the Volunteer Handbook, the Volunteer and Contractor training videos for instruction of volunteers and contractors as well as the Administrative Directives, Safe Prisons/PREA Plan and personnel directives concerning the training and employment/use of volunteers and contractors, we find this standard meets substantial compliance.

Standard 115.33 Inmate education

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

- Does Not Meet Standard (requires corrective action)

Admission and orientation was observed, the inmate handbook was reviewed and interviews were conducted with random inmates and staff which revealed that inmates receive training and information about the zero tolerance policy and how to report instances or suspicions of abuse and harassment.

The on-site visit and tour also revealed posters and printed announcements, in Spanish and English, throughout the institution in both Units, addressing inmate education and information regarding PREA.

Especially precise, and to the point of PREA training, was PREA video training received by each inmate and inmate mentor training conducted by specially trained inmates. This mentor training is titled PEER Education and is given to each offender at the Unit who has not attended the class. This is done within 30 days of arriving at the facility. The video was reviewed and four of the specially trained mentor inmates were interviewed revealing a positive, and in the auditors' opinion, culture changing effort to eliminate sexual abuse and sexual harassment in prison and specifically at the Lynaugh-Ft. Stockton Unit(s).

The number of inmates admitted during the past 12 months were 748 at the Lynaugh Unit and 693 at the Ft. Stockton Unit and the numbers of inmates educated/given PREA information at intake were 748 (Lynaugh) and 693 (Ft. Stockton), all inmates were trained.

The auditors found this standard in compliance based on the formal scripted and informal inmate interviews, and the observations made during the on-site visit.

Standard 115.34 Specialized training: Investigations

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

The agency's training policy, along with training curriculum and personnel policy, requires investigators to be trained in conducting sexual abuse investigations in confinement settings. This is outlined in a 59 page document; Correctional Training, Specialized Investigations.

The Office of the Inspector General also conducts specialized training as outlined in the OIG Operational Policy Manual, OPM.-02.15. The number of investigators currently employed by the TDCJ is 134. All have completed this required training. This information supplied by the Pre-Audit Questionnaire. Investigators are regionally assigned and are utilized/assigned to the Lynaugh-Ft. Stockton Unit as needed.

The agency maintains documentation showing that investigators have completed the required training.

The auditors reviewed the specialized training extended to investigators, and interviewed specially trained investigators. Based on the review of the above, and interviews with specialized staff, including the Warden, the auditors' assess compliance.

Standard 115.35 Specialized training: Medical and mental health care

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

Texas Tech University coordinates medical and mental health care at the Lynaugh-Ft. Stockton Unit(s). Emergency Medical Services (EMS) and hospital services (including PREA services) are accessed through the Pecos County Memorial Hospital. The two PREA auditors visited and interviewed staff at the Pecos County Memorial Hospital in Fort Stockton, Texas.

Correctional Managed Health Care Policies, CMHC-25.1 Orientation, CMHC-C 19 Continuing Education, and CMHC-G 57.1 Sexual Assault and Sexual Abuse, all direct specialized training for medical and mental health care staff.

Texas Tech health services staff/practitioners who regularly work at the Lynaugh-Ft. Stockton Unit(s) have received specialized training. The forensic examinations are done by SAFE/SANes at the Pecos County Memorial Hospital, and not by institutional staff.

The agency maintains documentation showing that medical and mental health practitioners have completed the required training. Twenty-four staff who regularly work at this facility have received the agency training (100%).

The auditors assess compliance based on review of the above policies, review of training records, and interviews with specialized health care staff.

Standard 115.41 Screening for risk of victimization and abusiveness

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

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

Inmates are assessed during the intake screening at the time of reception into the TDCJ, and upon being transferred to another facility, for their risk of being sexually abused by other inmates or of being sexually abusive towards other inmates. The Lynaugh-Ft. Stockton Unit(s) assesses each inmate received on the "chain" (through transfer).

The intake process includes an objective assessment tool SPPOM 03.01 Attachment E Form and its use is directed by the TDCJ Safe Prisons/PREA Operational Manual section, Assessment Screening. This is done at the original intake facility and at the assignment to another unit. It includes the 10 items listed in standard 115.41, subsection (d) of this standard. Note, the 10th item is not applicable as TDCJ does not solely detain inmates for civil immigration purposes.

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

Inmates, by policy, may not be disciplined for refusing to answer questions concerning risk assessments. Dissemination of inmate PREA information within the facility is on a need to know basis.

During the past 12 months, 671 inmates from the Lynaugh Unit and 608 inmates from the Fort Stockton Unit were screened for risk of sexual victimization and abusiveness. These inmates were through initial intake or transfer. This information taken directly from the Pre-Audit Questionnaire.

This standard was assessed as compliant based on review of the above process and interviews with intake staff, and interviews of random staff and inmates.

Standard 115.42 Use of screening information

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

During the intake process; it was noted that the institution made housing, bed, work, education, and program assignments for inmates based on the assessment tools and the classification committee review. Special attention was paid to the safety and security of those inmates that were at high risk of being sexually victimized and particular attention was paid to those inmates that were at risk of being sexually abusive or could be sexually abusive. Each risk assessment screening was/is on an individual basis.

Administrative Directives AD-04.17 Offender Housing Assignments and AD-04.18 Offender Job Assignments as well as the Intake Procedures Manual 4.01, and Unit Classification Procedures Manual 4.00 were reviewed by the auditors. The documents clearly outlined use of information and risk screening for housing, bed, work, education, and program assignments based on individual determinations necessary for safety and security and good order of the institution.

Interviews with intake and mental health staff, supported by interviews with inmates as well as observation of the assessment process, and review of the documentation supports the use of screening information as being on a "need to know" basis and consistent with appropriate custody and security.

Healthcare staff were especially concerned with privacy and confidentiality issues balancing the use of screening information with the goal of keeping inmates safe and secure.

The auditors reviewed the above policy and procedures, appropriate mental health care policies combined with interviews of staff and inmates and assess this standard as compliant.

Standard 115.43 Protective custody

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

TDCJ has a policy/plan Administrative Segregation Plan and the Safe Prisons/PREA Plan that prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination is such that there is no available alternative means of separation from likely abusers. The Lynaugh-Ft. Stockton Unit(s) follows and adheres to these plans.

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

Noted by the auditors: There are only seven (7) administrative and disciplinary segregation single cells at the Lynaugh Unit and only 32 administrative and disciplinary segregation single cells at the Fort Stockton Unit. This limited number of cells makes placement of inmates in segregation a premium thus, it is extremely logical to think that all alternatives would be explored before inmates were placed in involuntary segregation for protection. Simply, involuntary segregation was clearly a last resort.

Based on the above policies and plans, the facts as outlined, and interviews with staff and supervisors. This standard is found in compliance.

Standard 115.51 Inmate reporting

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

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

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

The PREA video shown during the intake process also outlines ways for inmates to report sexual abuse, harassment, retaliation, or staff neglect concerning PREA.

The PEER Inmate Mentor Program also addresses reporting sexual abuse and sexual harassment during the inmate intake and PREA inmate education process.

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

The agency provides for at least one way for inmates to report sexual abuse or sexual harassment that is not part of the Texas Department of Criminal Justice Correctional Institutional Division (CID) and is via the Texas Board of Criminal Justice (TBCJ) that has established a PREA Ombudsman's Office for reporting PREA incidents

Interviews with inmates and staff revealed that inmates know how to report sexual abuse and sexual harassment and that staff know how to report sexual abuse and sexual harassment based on this and the above, the standard is in compliance.

Standard 115.52 Exhaustion of administrative remedies

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

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

In accordance with the Safe Prisons/PREA Compliance Plan, the following steps are quoted when utilizing the grievance procedure: unit grievance staff is to A) "immediately telephone the highest-ranking security supervisor on duty to notify them

of the grievance allegations, B) notify all unit wardens, majors, chief of unit, classification, OIG, safe prisons/PREA compliance staff, and medical Department via the TDCJ mainframe email of the grievance allegations" this emphasizes the importance and the attention which the grievance procedure produces. The grievance process is an alternative to assist the inmate in reporting sexual abuse or sexual harassment.

In the past 12 months, there were five (5) grievances filed at the facility that alleged sexual abuse. All five (5) grievances reached a final decision within the 90 day timeframe and none required extension.

After review of the above policy and procedures and the grievance process, the auditors found this standard compliant.

Standard 115.53 Inmate access to outside confidential support services

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

Inmate access to outside confidential support services is supported by the TDCJ through its Safe Prisons/PREA Plan, the Safe Prisons/PREA Operational Manual (SPPOM) and through the Texas Board of Criminal Justice Policy, BP-03.91 Uniform Offender Correspondence Rules. Specifically, the PREA plan states "offenders shall be provided access to victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers, where available of local, state, or national victim advocacy crisis organization. The unit shall enable reasonable communication between offenders and these organizations and agencies, in as confidential manner as possible". Additionally, the SPPOM states "when an advocate, from a rape crisis center is not available to provide emotional support... the TDCJ shall upon request of the offender victim, provide an offender victim representative (OVR) to support the offender victim through the forensic medical examination process. In the investigatory interviews, the OVR shall provide emotional support, crisis intervention, information, and referrals. OVR's shall be approved by the unit to serve in this role and shall receive the necessary training concerning sexual assault, and forensic examination issues".

There is no rape crisis center available in the Lynaugh-Ft. Stockton area but the Institution has available trained staff (Chaplain, classification, mental health) to provide these above mentioned services.

The inmate handbook indicates the available emotional support services for sexual abuse victims, including the National, State, and Local Rape Advocacy Center listings. As mentioned above, there is no local rape crisis center which was discussed with the Pecos County Memorial Hospital. The nearest rape crisis centers are located over 60 miles away in the Midland Odessa area or the Alpine area of Texas.

Solicitation letters/templates have been prepared by the TDCJ to assist in requiring support services. Documentation has been maintained for these attempts to enter into Memorandums of Understanding (MOU).

Based on the above policies and documentation, interviews with institutional staff and inmates, and Pecos County Memorial Hospital staff, the auditors assess compliance with this standard.

Standard 115.54 Third-party reporting

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

The Texas Board of Criminal Justice (TBCJ) Ombudsman website provides a method to receive third-party reports of inmate sexual abuse or harassment. Executive Directives, ED-02.03 and ED-02.10, address information on the public website such as, how to report, to whom to report, and PREA complaints and inquiries. ED-02.10 attachment A, is a PREA Ombudsman Inquiry Response Form containing specific allegations, institutional actions, and additional pertinent information.

The policy states "the Texas Board of Criminal Justice (TBCJ) established the Prison Rape Elimination Act (PREA) Ombudsman's Office to investigate, process PREA complaints and inquiries in accordance with the Prison Rape Elimination Act Ombudsman policy statement". Moreover, it directs the public to the TBCJ website where the name, mailing address, and phone number to be used for the purpose of directing inquiries and complaints to the PREA Ombudsman are available.

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

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

Standard 115.61 Staff and agency reporting duties

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

All staff are required to report immediately and according to agency policy, any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility whether or not it is part of the agency. Also, staff is required to report retaliation against staff or inmates who report sexual abuse or staff neglect or violation of responsibilities that may have contributed to retaliation.

Simply, as outlined by the TDCJ in its Safe Prisons/PREA Plan and in its Safe Prisons/PREA Operational Manual, staff has a duty to report sexual abuse, sexual harassment, and retaliation.

The above policies and procedures also outlined in the above plan and manual prohibits staff from revealing information related to sexual abuse reports to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Interviews with staff, volunteers, and contractors as well as review of the training records, training curriculum and supporting documents confirm this responsibility and duty to report. Based on this, the auditors assess this standard as compliant.

Standard 115.62 Agency protection duties

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

When the agency or the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. Safety and security is first, as observed by the auditors at the Lynam-Ft. Stockton Unit(s). Again, the Safe Prisons/PREA Operational Manual and the Administrative Directive, AD-02.15, direct immediate action be taken to protect inmates who are at substantial risk of imminent sexual abuse. It also outlines the action to be taken to assist and implement appropriate protective measures without unreasonable delay.

The staff at this unit were very knowledgeable and well-trained in their protection duties and what their responsibilities require.

In the past 12 months, the facility determined that there was one (1) inmate subject to substantial risk of imminent sexual abuse. This incident was addressed immediately by staff.

The auditors find the standard in compliance based on the on-site tour, interviews with staff and inmates, and policies and procedures provided.

Standard 115.63 Reporting to other confinement facilities

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

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

Specifically, the Warden "will notify the head of the facility or appropriate office of the agency where the alleged incident occurred, as soon as possible, but no later than 72 hours after receiving the allegation at the TDCJ". Further, if a TDCJ unit receives notification of an allegation of sexual abuse "the individual receiving such notification shall provide the notification to the unit Warden. Appropriate follow-up to these notifications are outlined in the manual (primarily notification of the Office of the Inspector General, PREA Ombudsman.

During the past 12 months there have been zero (0) number of allegations the facility received that an inmate was abused while confined at another facility. In the past 12 months there have been two (2) allegations of sexual abuse Lynaugh-Ft. Stockton Unit(s) received from other facilities. The Emergency Action Center (EAC), was notified and appropriate follow-up was pursued as outlined in the Administrative Directive 80-16.20 Reporting Incidents to the Office of the Inspector General, and the SPPOM.

Based on the auditors' review of the above-mentioned policies, procedures, documents, and interviews with specialized staff, including the Warden and the Institutional Investigator, this standard was found in compliance.

Standard 115.64 Staff first responder duties

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

The TDCJ Safe Prisons/PREA Operating Manual, the Administrative Directive AD-16.03, Evidence Handling and the Office of the Inspector General Operating Procedure Manual; all detailed the policy and procedures for the first responder to an allegation of sexual abuse.

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

The auditors reviewed the training curriculum, documents, policies and procedures, and the video presentations outlining first
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responder duties and responsibilities. Additionally, the auditors again reviewed, staff "pocket instructions" and shift briefings, addressing PREA responsibilities.

The auditors' random interviews with staff, specialized staff, including higher level and intermediate level supervisors, training staff and investigative staff, all indicated compliance with this PREA standard, Staff First Responder Duties.

Note, it is documented on the Pre-Audit Questionnaire that there were 13 allegations of sexual abuse at the Lynaugh-Ft. Stockton Unit(s) one (1) of which was in the timeframe allowable for the collection of physical evidence. Additionally, there was one time in which the first person notified was a security staff member who was able to report as a first responder. There were zero (0) number of allegations made to a non-security staff member.

Standard 115.65 Coordinated response

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

The TDCJ Safe Prisons/PREA Operation Manual dictates responding to an allegation of sexual abuse and requires a coordinated effort between unit security staff, the Office of the Inspector General, medical and mental health services, and victim advocates/victim offender representatives. Procedures are outlined in this SPPOM and the Safe Prisons/PREA Plan. (The plan states "sexual abuse response and notification procedures contained within this plan and the SPPOM shall be followed to coordinate actions taken in response to an incident of sexual abuse")

Coordinated action begins with the notification process. "Immediately upon receiving knowledge of an alleged sexual abuse of an offender, the security supervisor responsible for notifications shall notify the following individuals: 1) the Major or the highest-ranking security supervisor on duty; 2) the Duty Wardens; 3) the Office of the Inspector General; 4) Health Services/Mental Health; 5) Victim Advocate/Offender Victim Representative (OVR), as applicable; 6) Emergency Action Center (EAC); and 7) Unit Safe Prisons/PREA Manager (USPPM).

Based on the auditors' review of the above policies and procedures and interviews with the specialized staff, Warden and Duty Wardens, this standard is assessed as compliant.

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

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

TDCJ advises there has been no collective bargaining agreement entered into or renewed since August 2012.

The TDCJ is not responsible for collective bargaining on the agency's behalf. Texas is a "right to work" state and does not have collective bargaining that would interfere with the preservation of the agency's ability to protect inmates from contact with abusers.

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)

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

The Safe Prisons/PREA Plan of the TDCJ, supported by the Safe Prisons/PREA Operations Manual, sections 02.04 & 05.08 and specific Personnel Directives PD-13, PD-29, PD-31 protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations, from retaliation by other staff or inmates.

Personnel policies also cover Sexual Harassment and Discourteous Conduct of a Sexual Nature, Discrimination in the Workplace, Sexual Misconduct with Offenders and establish General Rules of Conduct; all of which assist in protection against retaliation.

There is a 90 day monitoring period of time for retaliation review. Monitoring is assisted by offender and staff ninety-day monitoring forms (which can be extended if necessary), as well as other intervention practices which are indicative of the agency's commitment to prevent retaliation.

The Lynaugh-Ft. Stockton Unit(s) designates to its Majors, and PREA Managers, the responsibility of monitoring retaliation by inmates and staff with oversight by the Warden.

The Pre-Audit Questionnaire has acknowledged five (5) incidents of offender monitoring for retaliation and/or potential concern of retaliation at the Lynaugh Unit with appropriate monitoring and review being accomplished.

The two auditors reviewed the above, and based on documents, policies, and interviews with specialized staff, and the Warden, assess compliance for this standard.

Standard 115.68 Post-allegation protective custody

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

Administrative Directives, AD-03.50 and AD-04.63 as well as the agency's Administrative Segregation Plan prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If determined such housing is necessary, the Lynaugh-Ft. Stockton Unit explores other alternatives, such as transfer. As noted previously in the report, the Unit has very limited segregation cell bed space (segregation cells 7-Lynaugh/32-Ft. Stockton) and thus uses segregation cells most judiciously.

In the past 12 months zero (0) number of inmates, who have alleged to have suffered sexual abuse, have been held in involuntary segregated housing. Policy also dictates if an involuntary segregated housing assignment is made, the facility affords each inmate a review every 30 days.

The auditors found this standard in compliance based on policy and procedure, review of administrative segregation, and interviews with staff and inmates.

Standard 115.71 Criminal and administrative agency investigations

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

- Does Not Meet Standard (requires corrective action)

This standard contains 12 subsections a-l, and, as with all standards and subsections, these were reviewed through information, documents, policies, procedures, observations, and interviews made or accomplished by the auditors. Administrative Directive , AD-16.20, Board Policy BP-01 .07, Personnel Directive, PD-29, the Safe Prisons/ PREA Plan, SPPOM 05.05 & 05.11, and the state and agency retention schedules were some of the documents reviewed by the auditors.

TDCJ, through its Safe Prisons/PREA Plan, addresses investigations under the section, General Considerations. The plan outlines the following: 1) a uniform evidence protocol to investigate sexual abuse and sexual harassment, 2) sexual investigations shall be conducted promptly, early, and objectively including third-party and anonymous reports, and 3) the use of investigators who have been specially trained in sexual abuse investigations pursuant the TDCJ Safe Prisons/PREA Plan.

Administrative Directive, AD-16.20 Reporting Incidents/Crimes to the Office of the Inspector General, establishes policy related to criminal and administrative agency investigations. This policy includes the direction that allegations of conduct which appear to be criminal are referred for prosecution. The Office of the Inspector General addresses and ensures retention of all written reports for as long as the alleged abuser is incarcerated or employed by the agency +5 years.

Based on the above, the two PREA auditors assess compliance.

Standard 115.72 Evidentiary standard for administrative investigations

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

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

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

Based on this policy and procedure, and confirmed by interviews with the Warden and investigators, the auditors find this evidentiary standard in compliance.

Standard 115.73 Reporting to inmates

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

The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The policies are outlined in the Safe Prisons/PREA Plan and the Safe Prisons/PREA Operational Manual (sections 05.05, 05.10, 05.11, and attachments; form F, Unit Classification Committee Notification of Substantiated, Unsubstantiated, or Unfounded; form J, Offender Acknowledgment Form with Signature/Absence/Refusal; form M, Offender Notification Brochure signed by the Warden, with an original to the inmate).

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

Documents had interviews with investigators which confirm that when an inmate makes an allegation to have suffered sexual abuse or sexual harassment he is informed verbally or in writing as to whether or not the allegation was determined to be substantiated, unsubstantiated or unfounded following an investigation. Auditors assess compliance.

Standard 115.76 Disciplinary sanctions for staff

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

Personnel policy of the TDCJ stipulates that employees or representatives of the Department are expected to adhere to the highest standards of conduct while on duty or off duty, including the adherence to the Rules of Conduct outlined for disciplinary violations.

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

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

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

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

Lynaugh-Fort Stockton Unit(s) has had zero (0) number of staff from the facility who have violated agency sexual abuse or sexual harassment policies. There have also been zero (0) number of staff who have been terminated or resigned while under investigation during the past 12 months. Additionally, in the past 12 months there have been zero (0) number of staff from the facility who have been disciplined short of termination, for violation of agency sexual abuse or sexual harassment policy.

Based on the auditors' review of the above, this standard is assessed compliant.

Standard 115.77 Corrective action for contractors and volunteers

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

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

Training the volunteers and contractors is outlined in PREA standard 115.32, the VSP training and orientation, the volunteer services training video, and acknowledgment forms for training (and videos) for volunteers and contractors. The auditors

recognized, through their review of the training, the gravity of any volunteer or contractor who engages in sexual abuse, such that misconduct, sexual abuse, sexual harassment may be reported to law enforcement agencies or licensing boards.

Volunteers and contractors signed acknowledgment forms indicating their orientation, training, and understanding of such. This documentation is maintained.

In the past 12 months there have been zero (0) number of volunteers or contractors reported to law enforcement for engaging in sexual abuse of inmates (per the facility Pre-Audit Questionnaire).

Based on the auditors' review of the above, this standard is assessed compliant.

Standard 115.78 Disciplinary sanctions for inmates

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

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

The inmate discipline policy is a substantial 47 page document outlining major and minor offenses, all with different levels, but clearly indicating a very formal disciplinary process in the administrative action. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process.

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

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

Based on the auditors' review of the above, this standard is assessed compliant.

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

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

Risk screening and risk assessment is especially important during the intake process within the TDCJ. The Lynaugh-Ft. Stockton Unit(s) use the Unit Classification Committee (UCC) system in helping screen inmates. This is supplemented with personal interviews of the inmate by the PREA Compliance Manager and other staff as necessary. During this intake process and risk screening process, inmates that disclose prior sexual victimization are offered a follow-up with a mental health practitioner within 14 days of intake screening. This screening and follow-up is outlined in the Safe Prisons/PREA Plan and in the Safe Prisons/PREA Operational Manual.

The Institutional Health Services Department of Texas Tech University, in association with TDCJ, also addresses medical and mental health screenings, history of sexual abuse in its policies, CMHC E-35.2, Mental Health Evaluation and, CHMC G-57.1, Sexual Assault/Sexual Abuse Follow-Up Services.

Information related to sexual victimization or abusiveness that occurred other than while imprisoned and discovered in health screenings is strictly limited to medical and mental health practitioners. The medical and mental health practitioners obtain informed consent before reporting prior sexual victimization that did not occur in an institutional setting.

The auditors reviewed the policies and procedures, the Pre-Audit Questionnaire, and interviews with specialized medical and mental health care staff, and random inmates, which confirmed compliance with this PREA standard.

Standard 115.82 Access to emergency medical and mental health services

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

Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Emergency medical care is provided through Texas Tech University staff at the facility, 911 emergency/ambulance services, and through the local Pecos County Memorial Hospital in Fort Stockton, Texas. The auditors met with staff at the Pecos County Memorial Hospital and were informed that the level of care at the institution, Lynaugh-Ft. Stockton Unit(s) was comparable to the level of care for the community.

Based on interviews with staff and inmates at the facility, interviews with the local hospital and community persons, and the observation of facility operations, the auditors found that this standard meets compliance.

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

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

The Lynaugh-Ft, Stockton Unit(s) offers medical and mental health evaluation, treatment, and victim assistance, as appropriate, to all inmates who have been victimized by sexual abuse. Treatment and services are also extended to abusers.

Medical/mental health treatment is outlined in the Safe Prisons/PREA Plan and is outlined and explained in the section Ongoing Medical and Mental Health. It is further detailed in the Correctional Managed Healthcare Policy, G-57.1, Sexual Assault/Sexual Abuse, which further addresses ongoing care and follow up. Healthcare employees interviewed at the facility confirmed their commitment and dedication to appropriate and personalized, individualized total health care to the inmates.

Brochures, handouts and materials on sexual assault awareness are distributed to the inmates during intake. There is a video shown during intake, and additionally, the inmate handbook advises the inmate population of offerings by the Medical and Mental Health Department concerning evaluation, treatment, and ongoing medical and mental health care as appropriate.

Interviews with randomly selected inmates, specialized health care staff, confirmed the University of Texas Tech's attention to and care for the victims and abusers pursuant PREA law. The auditors find this standard in compliance.

Standard 115.86 Sexual abuse incident reviews

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

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

The Safe Prisons/PREA plan establishes an incident review team as follows: "1) 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. 2) the review shall be conducted in accordance with ADD-02.15.... 3) the review team shall include upper-level management with input from line supervisors, investigators, and medical and mental health practitioners. 4) the unit shall implement recommendations that result from the review or document the reasons for not doing so."

There is a monthly Safe Prisons/PREA report outlined in the SPPOM section 08.01, which involves the Warden and the PREA Compliance Manager reviewing findings and implementing the recommendations or improvements concerning the incident reviews. There is a sexual abuse incident review team at the Lynaugh-Ft. Stockton Unit(s). In the past 12 months, there were three (3) reviews of criminal and administrative investigations of alleged abuse completed at the facility excluding only "unfounded" incidents. Reviews are made monthly.

Interviews with the Incident Review Team, the Warden, and the PREA Compliance Manager reflect an intense and thorough involvement in incident reviews by the team members, and key staff at the facility. Also reflected was the institutions interest in compliance with PREA law and eliminating rape in prison.

Based on the auditors' review of documents, policy, observation of facility operations, and interviews with staff and inmates, this standard was found in compliance.

Standard 115.87 Data collection

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

The Texas Board of Criminal Justice (TBCJ) has established policy outlining the mission of the PREA Ombudsman to serve as an independent office to monitor or conduct administrative investigations as well as to provide a point of contact for the public, elected officials, and offenders who have complaints or inquiries regarding allegations of sexual assault, sexual contact, staff sexual misconduct, or initiatives related to PREA. It also includes collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from each correctional facility. It further directs that statistical information regarding the total number of allegations of sexual assault, sexual contact, and staff sexual misconduct investigated by the TDCJ, and the outcome of the investigations, and any disciplinary action resulting from the investigations, will be made public and will be in an annual report (TDCJ Policy, BP-02.09).

The Survey of Sexual Violence (SSV) was reviewed by the auditors.

Data from private facilities complies with SSV reporting.

The PREA Ombudsman's brochure, organizational chart, operational information, policy OIG-04.05, Safe Prisons/PREA monthly report and the Safe Prisons/PREA Plan were all again reviewed by the auditors. Based on the above, this standard was assessed as compliant.

Standard 115.88 Data review for corrective action

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

The TDCJ is continually reviewing and assessing and collecting Prison Rape Elimination Act (PREA) data for corrective action in this largest state prison system. The monthly report and the PREA Ombudsman's review of data is most impressive and essential to the foundation of eliminating rape in prison and compliance with the PREA law.

The auditors found, through their review of the TDCJ annual SSV and the Lynaugh-Ft. Stockton Unit(s) monthly report, that there is a coordinated effort to improve the effectiveness of the agency's goals concerning PREA compliance and the agency's "safe prisons" and PREA goal of sexual abuse prevention, detection, and response. These reports and data collection for corrective action will help not only in identifying problems but will assist in staff training and professional development, will assist in eliminating the inmate culture of silence and negative retaliatory behavior, and will assist in improving overall institutional management operations.

Interviews with the Warden and higher intermediate staff, review of the data collected, plus the observation of the of institution's commitment to corrective action support the auditors' assessment of compliance.

Standard 115.89 Data storage, publication, and destruction

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

The TDCJ Safe Prisons/PREA Plan ensures that incident-based and aggregate data are securely retained. The Agency maintains sexual abuse data collection pursuant statute, code, and the PREA standards, 115.87 & 115.89 for at least 10 years after the initial date of collection unless federal, state, or local law requires otherwise.

The auditors reviewed the records retention schedule brochure along with a memo from records management indicating security of the Texas government records from creation to final disposition. Records are required to be maintained as part of the Texas State Library and according to Texas Government Code 444.184.

Agency policy requires that aggregated sexual abuse data from facilities under the TDCJ and private facilities it has contracted with, make data available to the public, at least annually, through its website. The PREA Ombudsman's office makes this available in its PREA annual report.

The auditors have reviewed the TDCJ website PREA section, and have seen numerous facility PREA reports. The auditors have also reviewed the annual Survey of Sexual Violence that is submitted to the federal government.

Based on the review of documents, information, retention schedule, and interviews with the Warden and PREA Manager, the auditors find this standard in compliance.

AUDITOR CERTIFICATION

I certify that:

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

James Curington

February 13, 2016

Auditor Signature

Date