

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: November 5, 2015

Auditor Information			
Auditor name: Chris Sweney			
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Email: csweney.prea@gmail.com			
Telephone number: (402) 658-0344			
Date of facility visit: October 6, 2015 – October 9, 2015			
Facility Information			
Facility name: TDCJ-Montford Unit			
Facility physical address: 8602 Peach Street, Lubbock, TX 79404			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: (806) 745-1021			
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: Warden Robert Stevens			
Number of staff assigned to the facility in the last 12 months: 607			
Designed facility capacity: 1078			
Current population of facility: 846			
Facility security levels/inmate custody levels: All except death row			
Age range of the population: 18-74			
Name of PREA Compliance Manager: Sue Gamez		Title: Unit Safe Prisons PREA Manager	
Email address: Sue.Gamez@tdcj.texas.gov		Telephone number: (806) 745-1021	
Agency Information			
Name of agency: Texas Department of Criminal Justice			
Governing authority or parent agency: <i>(if applicable)</i> Click here to enter text.			
Physical address: 861-B I-45 North, Huntsville, Texas, 77320			
Mailing address: <i>(if different from above)</i> P.O. Box 99, Huntsville, Texas, 77342			
Telephone number: 936-295-6371			
Agency Chief Executive Officer			
Name: Brad Livingston		Title: Executive Director	
Email address: brad.livingston@tdcj.texas.gov		Telephone number: 936-437-2101	
Agency-Wide PREA Coordinator			
Name: William Stephens		Title: Director, Correctional Institutions	
Email address: william.stephens@tdcj.texas.gov		Telephone number: 936-437-2170	

AUDIT FINDINGS

NARRATIVE

A PREA audit of the John T. Montford Unit was conducted October 7th – 9th, 2015 by Chris Sweney, Certified PREA auditor. Upon arrival at the facility I was greeted by Warden Robert Stevens and his executive team. Following a short in briefing we began a tour of the facility. The tour included all housing areas, kitchen, laundry, maintenance shop, education, gymnasium, hospital, and the trustee work camp. PREA posters and audit notification letters were seen in all areas. Following the tour I conducted ten specialty staff interviews including the Warden, acting PREA Compliance Manager, Medical and Mental Health staff, First Responders, Volunteers and Contract staff, Investigators and Human Resources. Additionally, I conducted ten random staff interviews covering both shifts. All staff were very aware of the PREA standards and had a good understanding of their responsibilities. On the second day I was given a listing of all offenders housed in the various areas at the facility and randomly selected inmates from each unit including offenders who were limited English speaking and LGBTI. I conducted a total of seventeen random offender interviews and three special population interviews. This included five offenders from the trustee camp. The offenders were aware of the PREA standards and their rights to be free from sexual abuse and harassment. Prior to leaving the facility I met with the Warden and his staff. One recommendation was made with regards to the placement of PREA related education materials. Overall, staff at the Montford Unit do a very good job providing a safe environment for a difficult population.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Montford Unit (MU) is a TDCJ prison that has the capacity to house 1,074 adult male offenders. The Unit is designed to house 550 offenders in a Psychiatric Facility, 84 offenders in a Western Regional Medical Facility (WRMF), and 40 offenders in a Long Term Care facility (LTC). In addition, the Unit has a 400-bed Trusty Camp that provides the offenders that are needed to perform the various work assignments at the main unit. The facility is located on a 1,304 acre site approximately two miles southeast of Lubbock, Texas. The staff includes 564 TDCJ employees and 226 Texas Tech employees. The Psychiatric facility is the largest state facility providing that type of care. The Western Regional Medical Facility (WRMF) operates a 24-hour emergency room. The WRMF departments include surgery, dialysis, physical therapy, radiology, and a medical laboratory. Clinics include ophthalmology, orthopedics, podiatry, neurology, dermatology, and internal medicine. The offender housing consists of one person, two person and 4 person cells. All meet the ACA square footage requirements. The offenders are allowed access to recreation, television, visitation, commissary, telephone and other privileges consistent with their medical requirements. The Trusty Camp is located adjacent to the main unit. A sally port facilitates passage between the two prisons. The Camp has 4 dorm style housing buildings each holding 100 offenders. In addition, four other structures provide for food service, visitation, medical, recreation, and the administration. Two chain link fences with razor wire provide a secure perimeter for the 27.3 acre compound. There is a 24/7 armed roving patrol to service the perimeter. The Main Unit and the Camp have 14 buildings within a secure compound that provides spaces for administration, visiting, food service, education, offender housing, medical, commissary, maintenance, laundry, recreation, central control and two perimeter sally ports, one at the front entrance for pedestrians, one at the rear for vehicles. The Montford Unit offers educational programs sponsored by the Windham School District that includes academic opportunities for eligible offenders. The medical program is operated by Texas Tech University. Water and sewer services are provided by the city of Lubbock. Montford Unit is managed by one Senior Warden and one Assistant Warden.

SUMMARY OF AUDIT FINDINGS

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Number of standards exceeded: 2

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 2

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)

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

TDCJ-Montford Unit has a zero tolerance policy towards all forms of sexual abuse and harassment. This policy outlines how the department prevents, detects, and responds to incidents of sexual abuse and sexual harassment. The policy also includes definitions of prohibited behaviors and sanctions for those who participated in those behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

The agency's designated PREA Coordinator is indicated by the department's organizational chart. The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards.

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)

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This standard does not apply. TDCJ-Montford Unit does not contract for the confinement of inmates.

Standard 115.13 Supervision and monitoring

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

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TDCJ-Montford Unit is a direct supervision facility and has a staffing plan which meets the requirements of this standard. Deviations from the plan are documented and forwarded to the regional office. Staffing requirements are assessed annually and adjustments are made if necessary. Unannounced rounds are completed by supervisors on each shift and by administrative staff on a daily basis. Rounds are documented in the area log and offender interviews indicated this is a common practice. Policy prohibits staff from alerting other staff members that supervisory rounds are occurring.

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)

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This standard does not apply. TDCJ-Montford Unit does not house youthful inmates.

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)

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

The TDCJ-Montford Unit does not conduct cross-gender pat searches, strip searches or cross-gender visual body cavity searches. All strip searches are documented. The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except when such viewing is incidental to routine cell checks. Agency staff is trained to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates.

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

TDCJ-Montford Unit takes steps and has a policy (AD-04.25 P:2-4, 8-10, CMHC G-51.5 P;1-2, AD-06.25 P:1, SM-05.50 P:3, AD-04.25 P:2-4,8-9) which ensures residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. TDCJ provides inmates a handbook and which is available in English and Spanish and their PREA education video is available with subtitles. Additionally, the facility has several bilingual staff available. PREA posters and brochures are provided in English and Spanish.

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)

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TDCJ-Montford Unit does not hire or promote anyone who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. (PD-71 P:2, 24-25, PD-73 P:1, 3-4, PD-75 P:4) TDCJ completes criminal background checks on all new employees, contract staff and volunteers before they are allowed to have contact with inmates. Criminal background checks are repeated every five years for current employees, contract staff and volunteers. All TDCJ applicants are asked about prior sexual abuse as part of the application process. Nothing found in policy prohibits TDCJ from provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee if requested from an institutional employer for whom such employee has applied to work.

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)

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

TDCJ-Montford Unit considers the effect of any new design, acquisition, expansion, or modification on the agency's ability to protect inmates from sexual abuse. Protection of residents from sexual abuse through the installation of electronic surveillance and other technology is also consider. (SOPM 07.02 (rev. 4))

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)

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

TDCJ-Montford Unit is not responsible for investigating criminal allegations of sexual abuse, however TDCJ has a policy (AD-16.03 P:13 SPPOM-05.01 Sexual Abuse Checklist) which ensures that a uniform evidence protocol is followed which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. TDCJ-Montford Unit would send any victim of sexual abuse to Texas Tech University Hospital in Lubbock. TTHU is staffed with trained Sexual Assault Nurse Examiners (SANE) as outlined by 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)

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

TDCJ-Montford Unit has a policy (SPPOM-05.05 P:1, SPPOM-05.01 P:2 S:III) which ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Staff and inmate interviews demonstrated a thorough understanding of this policy.

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)

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

TDCJ-Montford Unit provides all staff with initial and ongoing training which includes the their zero tolerance policy, how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies, inmates' right to be free from sexual abuse and sexual harassment, the right of inmates and employees to be free from retaliation, abuse and all other components of this standard. Employee training is documented and maintained in the employee's personnel file. Staff interviews verified a comprehensive understanding of PREA related training. (AD-12.20 P:1,8, PREA Curriculum)

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)

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

TDCJ-Montford Unit ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies. Each volunteer and contractor is given information about PREA prior to entering the facility. Training for volunteers and contractors is documented and maintained. (Curriculum P:21-24 S:34-35, 115.32 A-A Handbook for Volunteer, 115.32 A-Letter of Orientation for Special Volunteers) Volunteer and contract staff were interviewed and very aware of their responsibilities as outlined by these standards.

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)

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

TDCJ-Montford receives offenders from other TDCJ facilities, at which they receive their initial PREA information. Upon arrival, the Montford Unit provides offenders with information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to make a report. Within thirty days of arrival offenders attend education programs which provide additional information. Documentation of these sessions were verified. Random offender interviews confirmed information is provided and understood. TDCJ-Montford has a unique inmate population; many have significant mental health issues. Staff at the Monford Unit do an exceptional job ensuring these offenders understand their rights as outlined by the PREA standards. Processes are in place to ensure all inmates including those who are limited English proficient understand the information provided. In addition to formal education the facility also provides information in the form of posters and handouts. (UCPM-05.00 P:1, AD-06.25 P:1, AD-04.25 P:1, CMHC G-51.1 P:2, CMHC:G-51.5, SPPOM-02.03 P:1, Offender SAA Video Letter, Offender SAA Video Script P:1)

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The TDCJ-Montford Unit provides specialized investigative training to internal investigators and investigators from the Office of Inspector General. The training covers all components of this standard and sessions are documented and retained by the agency. (BP-01.07 P: 2-3, CTSD Specialized Investigations, OIG LP-3201, OIG OPM-02.15 P: 1, PD-97 P: 5-6)

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)

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

The TDCJ-Montford Unit provides specialized training for medical and mental health care staff. Documentation and staff interviews confirm all components of this standard are met. (CMHC C-25.1, CMHC G-57.1 P: 1, CMHC C-19.1)

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)

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TDCJ-Montford Unit screens all inmates for risk of victimization and abusiveness upon arrival. The screening is completed within the first twenty-four (24) hour. The screening instrument includes all criteria outlined by this standard.

Within the first thirty (30) days of arrival at the facility, the staff reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Residence are not disciplined for refusing answer questions during the screening process.

Information obtained during the initial assessment and reassessment is placed in the residence file. Only authorized staff have access to these files. (SPPOM-03.01 P:1, SPPOM-03.01 P:1, SPPOM-03.01 Assessment Screening, SPPOM-03.01 Attachment E, PREA Plan P:16)

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)

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TDCJ-Montford Unit uses information from the risk assessment to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Transgender or intersex residence's housing and programming assignments are consider on a case-by-case basis, placement considers the inmate’s health and safety, and whether the placement would present management or security problems. Transgender or intersex inmate's placement is reassessed as needed.

Transgender or intersex inmate’s own views with respect to his or her own safety is given consideration.

Transgender and intersex inmates are given the opportunity to shower separately from other inmates.

TDCJ-Montford Unit does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated units based solely on identification or status. (SPPOM-03.01 Assessment Screening, IPM-04.01 P:1, AD-04.17 P:1, AD-04.18 P:1, PREA Plan P:18, CMHC E-35.1 P:1-2, CMHC G-51.11)

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)

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

The TDCJ-Montford Unit does not have a protective custody unit. Offenders that report sexual abuse are house separately until an investigation is completed. An assessment of the offender is completed within 24 hours and every 30 days thereafter to determine the offender’s status. If necessary, TDCJ has other facilities in the region that are better suited for housing vulnerable offenders long term. (PREA Plan P: 18, SPPOM-05.05 P: 5, Administrative Segregation Plan P: 1, 2, 4, I-169 Form, PREA Plan P:19, Administrative Segregation Plan P:11, Guidelines for ASC Members P:2)

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)

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

The TDCJ-Montford Unit provides multiple ways for offenders to report sexual abuse. Additionally, offenders can contact the PREA Ombudsman’s office in Huntsville which reports to the state Office of Inspector General. Staff accepts reports made verbally, in writing, anonymously, and from third parties. Staff may also make reports of sexual abuse. All reports are documented and investigated. (PREA Plan P:20, BP-03.91 P:3,8, Immigration statement of fact, SPPOM Attachment A, SPPOM Attachment AS, TDCJ PREA Brochure, ED-02.10 P:1, PREA Plan P:21)

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)

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The TDCJ-Montford Unit does allow offenders to file grievances regarding sexual abuse. All components of this standard were confirmed by documentation as well as staff and offender interviews. (Texas Govt. Codes §§ 493.014, 501.008, AD-03.77 Offender Grievances, AD-03.82 Management of Offender Grievances, AD-03.82 P:5-6, AD-03.82 P:7, Appendix-B, AD-03.82 P:8, OGOM sections 1.01 P: 1, 1.04 P:2, 7.00 P:1 Appendix-J, Texas Govt. Code §501.008, AD-03.82 P:9, OGOM section 4.00 P:1, PREA Plan P:22, Safe Prisons OPI Log, OGOM section 1.01 P:4)

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)

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The TDCJ-Montford Unit provides offenders with access to outside support services. Documentation is provided to each offender upon intake into the facility and information is posted in all living units. Additional information is available in the law library. Offenders are informed of the extent that their communication is monitored. (Safe Prisons PREA Plan; P:13 SPPOM-02.02 P: 1, BP-03.91 P:1, 9, Offender Orientation Handbook)

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)

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The TDCJ-Montford Unit accepts third-party reports of sexual abuse. Information is posted in the visiting area and available on the TDCJ website. (SPPOM-04.02, ED-02.03 P: 1,2,8,9, ED-02.10 P: 1, 3, General Information for Families of Offenders Brochure P: 32-33, Safe Prison PREA Plan P: 23)

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)

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

The TDCJ-Montford Unit requires all staff to immediately report and document sexual abuse and sexual harassment. All components of this standard were verified in policy and staff interviews. (Safe Prisons PREA Plan P: 23, PD-29 P: 3-4, SPPOM-05.01 P:4)

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)

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

The TDCJ-Montford Unit takes immediate action to protect offenders that are at a substantial risk of sexual abuse. (SPPOM-05.01 P: 1, 3, SPPOM-05.03 P: 1, AD-02.15 P: 1,6)

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)

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The TDCJ-Montford Unit has policies that address allegation that an inmate was sexually abused while confined at another facility, the policy require the head of the facility that received the allegation to notify the Office of Inspector General. This notification shall be made within 72 hours of receiving the information and documented. The warden was able to articulate this information in his interview. (BP-01.07 P: 2, AD-16.20 P: 5, PREA Plan P: 24, SPPOM-04.01 P1-3, Safe Prisons PREA Plan P: 24, AD-16.20 P: 5, 7, SPPOM-04.01 P: 1-2)

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)

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

TDCJ-Montford Unit provides training to all first responders which cover the components of this standard. Staff interviews confirmed a thorough understanding of their responsibilities. (SPPOM-05.01 P:2-3, AD-16.03 P:1-3, OIG OPM-04.05 P: 4-5, SPPOM-05.01 P: 2-3, AD-16.03 P: 1)

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)

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

TDCJ-Montford Unit has a coordinated response plan which includes first responders, medical and mental health practitioners, investigators, and facility leadership. (PREA Plan P: 26, SPPOM-05.01 P:1-2,)

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)

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

TDCJ-Montford Unit has space and ability to protect inmates from known abusers. Nothing is in place that would hinder the protection of an resident from a staff member.

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)

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

The TDCJ-Montford Unit has policies and processes in place to protect inmates and staff that report sexual abuse. Those that report are monitored for at least 90 days; the policy allows the monitoring period to be continued if necessary. (PD-22 P: 41-42, 51, and 53, Addendum P: 5, PD-29 P: 1-3, PD-31 P: 1, PD-13 P: 1, 4, and 5, SPPOM-05.08 P: 1, Attachment NS Staff, Attachment NO Offender, SPPOM-02.04 P: 1-3)

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)

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

The TDCJ-Montford Unit may use segregated housing to protect those that report sexual abuse. Victims placed in segregated housing are monitored and seen by medical and mental health. Placement is reviewed within twenty-four hours and again within thirty days. Alternative housing is generally found within thirty days of placement. During the 12 months prior to the audit no inmate was placed on involuntary segregation. (Administrative Segregation Plan P: 2, 4, and 11, AD-04.63 P: 2, 4, AD-03.50, PREA Plan P: 26, Guidelines for PREA Audit Report

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)

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

The TDCJ-Montford Unit investigates all allegations of sexual abuse and sexual harassment. Administrative investigations are conducted by the “Safe Prisons” Unit and criminal investigations are handed over to the Office of Inspector General. Facility staff is required to cooperate fully with all external investigations. Investigators receive specialized training to conduct investigations dealing with sexual assault and abuse. Evidence is collected using a uniform method that preserves evidence. (PREA Plan P: 25, AD-16.20 P: 2-3, 7, BP-01.07 P: 2, 6, Retention Schedule P: 49, 60. OIG OPM-03.72)

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)

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

The TDCJ-Montford Unit imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (PREA Plan P: 28, SPPOM-05.05 P: 9-10, CTSD Spec. Inv. Training P: 6)

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)

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

The TDCJ-Montford Unit informs offenders as to whether allegations of sexual abuse have been determined to be substantiated, unsubstantiated, or unfounded. Facility staff meets with the inmate to discuss the findings. Processes are in place to notify an offender of the outcome of an investigation involving staff sexual misconduct. (PREA Plan P: 30, SPPOM-05.05 Attachment J P: 5, SPPOM-05.05 Attachment M, SPPOM-05.11 Attachment F P: 6, SPPOM-05.10 P: 1, 6, SPPOM-05.05 Attachment J, Attachment M)

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)

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

The TDCJ-Montford Unit has a policy that addresses staff sexual misconduct. Sanctions include termination and criminal prosecution. Investigations are completed even if the employee chooses to resign. (PD-13 P: 1, 3-5, PD-22 P: 1, 41-42, 48, Addendum P: 5, PD-29 Addendum P: 5,)

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)

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

The TDCJ-Montford Unit has policies in place to address contractors or volunteers that may engage in sexual abuse of an offender. Volunteers and contractors receive training regarding the consequences of such activities. The volunteers interviewed were able to articulate this information. (Volunteer Service Plan P: 11-13, 23, Acknowledgement of Volunteer Training Orientation, 2014 Volunteer Services Training Video Script P: 21-24, PD-29 P: 5-6, Safe Prisons PREA Plan P: 39)

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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The TDCJ-Montford Unit has policies which address discipline for inmates that engage in sexual abuse. All components of this standard where demonstrated in policy and staff and offender interviews. (PREA Plan P: 30-31, GR-106 P: 18-21, 26, Attachment A-2, Email of New Offense 20.4, CMHC E-35.1 P: 1-2, SOTP-01.01 P: 1)

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)

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

The TDCJ-Montford Unit conducts medical screenings upon intake and again within fourteen days of the offender’s arrival at the facility. Information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to medical and mental health practitioners and other select staff informed consent is obtained before information is shared with additional staff. (CMHC E-35.2 Mental Health Evaluation P: 1, CMHC G-57.1 Sexual Assault/Sexual Abuse P: 1-2, SPPOM-05.05 P: 2-3, CMHC A-09.01 P: 1, CMHC A-61.1 P: 1-3, CMHC G-57.1P:1-2, CMHC I-70.1 P: 1, CPOM-02.05 P: 1, CMHC H-61.1 P: 4)

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)

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

Upon receiving a report of sexual abuse, the Montford Unit does not restrict access to medical treatment. Victims are transferred to Texas Tech University Hospital and attended to by qualified medical staff at no charge. Victims of sexual abuse receive medical attention regardless of whether the victim names the abuser or cooperates with any investigation. (CMHC A-01.1P: 1, CMHC G-57.1P: 1, SPPOM-05.01 P: 1-2, Attachment B Rights to Crime Victims P: 2)

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)

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

The TDCJ-Montford Unit offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Victims of sexual abuse are offered tests for sexually transmitted infections. This facility does not house female offenders. (PREA Plan P: 14, SPPOM-05.01 P: 1-2, 4, SPPOM-05.05 Attachment J P: 1, CMHC G-57.1 P: 1-2)

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)

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

The TDCJ-Montford Unit conducts an incident review of all substantiated and unsubstantiated allegations of sexual abuse. These reviews are conducted within thirty days following the conclusion of the investigation. All components of this standard were verified in policy and through staff interviews. (PREA Plan P: 31, SPPOM-08.01 AD-02.15, Administrative Review/Investigation)

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)

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

The TDCJ-Montford Unit collects uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The facility completes the Survey of Sexual Violence (SSV) and submits it to the Department of Justice each year. (BP-02.09 P: 3, AD-02.15 P: 1-12, OIG OPM-04.05 P: 5-6, PREA Plan P: 35, SPPOM-01.01- I.A.1)

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)

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

The TDCJ-Montford Unit reviews data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. The Warden and his staff use the data to identifying problem areas and taking corrective action when necessary. (BP-02.09 P: 3, AD-02.15 P: 1-12, OIG OPM-04.05 P: 5-6, PREA Plan P: 35, SPPOM-01.01- I.A.1)

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)

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

The TDCJ-Montford Unit retains all documentation related to cases of sexual abuse and data collected as a result of these incidents. Annual reports are submitted to TDCJ regional staff and posted on the TDCJ website. (PREA Plan, PREA Ombudsman, <http://www.tdcj.state.tx.us>)

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.

Chris Sweney _____

 Auditor Signature

November 5, 2015 _____
 Date