PREA Facility Audit Report: Final

Name of Facility: Henley-Plane Complex
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 08/13/2022

Auditor Certification
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.
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Full Name as Signed: Tracy Shumard
Date of Signature: 08/13/2022

AUDITOR INFORMATION
Auditor name: Shumard, Tracy
Email: tracy@preaauditing.com
Start Date of On-Site Audit: 05/25/2022
End Date of On-Site Audit: 05/27/2022

FACILITY INFORMATION
Facility name: Henley-Plane Complex
Facility physical address: 7581 Texas 321, Dayton, Texas - 77535
Facility mailing address:

Primary Contact
Name: Brenda German
Email Address: Brenda.German@tdcj.texas.gov
Telephone Number: 9364374904

Warden/Jail Administrator/Sheriff/Director
Name: Tanya Wilson
Email Address: Tanya.Wilson@tdcj.texas.gov
Telephone Number: 9362582476
### Facility PREA Compliance Manager

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address:</td>
</tr>
<tr>
<td>Telephone Number:</td>
</tr>
</tbody>
</table>

### Facility Health Service Administrator On-site

<table>
<thead>
<tr>
<th>Name:</th>
<th>Rebecca Mallet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address:</td>
<td><a href="mailto:remallet@UTMB.EDU">remallet@UTMB.EDU</a></td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>9362582476</td>
</tr>
</tbody>
</table>

### Facility Characteristics

| Designed facility capacity: | 2512 |
| Current population of facility: | 1460 |
| Average daily population for the past 12 months: | 1255 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Females |
| Age range of population: | 18-68 |
| Facility security levels/inmate custody levels: | Henley-SAFP, ITPC, ISF/Plane-J1,J2,J4,G1,G2, Transient |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 440 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 95 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 20 |

### AGENCY INFORMATION

<table>
<thead>
<tr>
<th>Name of agency:</th>
<th>Texas Department of Criminal Justice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governing authority or parent agency (if applicable):</td>
<td></td>
</tr>
<tr>
<td>Physical Address:</td>
<td>861-B I-45 North, Huntsville, Texas - 77342</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>PO Box 99, Huntsville, Texas - 77340</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>8005350283</td>
</tr>
</tbody>
</table>
### SUMMARY OF AUDIT FINDINGS

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

<table>
<thead>
<tr>
<th>Number of standards exceeded:</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>115.13 - Supervision and monitoring</td>
</tr>
<tr>
<td></td>
<td>115.15 - Limits to cross-gender viewing and searches</td>
</tr>
<tr>
<td></td>
<td>115.42 - Use of screening information</td>
</tr>
<tr>
<td></td>
<td>115.67 - Agency protection against retaliation</td>
</tr>
</tbody>
</table>

| Number of standards met: | 41 |

| Number of standards not met: | 0 |
## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1. Start date of the onsite portion of the audit:</td>
<td>2022-05-25</td>
</tr>
<tr>
<td>2. End date of the onsite portion of the audit:</td>
<td>2022-05-27</td>
</tr>
</tbody>
</table>

#### Outreach

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☑ No</td>
</tr>
</tbody>
</table>

### AUDITED FACILITY INFORMATION

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>14. Designated facility capacity:</td>
<td>2512</td>
</tr>
<tr>
<td>15. Average daily population for the past 12 months:</td>
<td>1255</td>
</tr>
<tr>
<td>16. Number of inmate/resident/detainee housing units:</td>
<td>18</td>
</tr>
<tr>
<td>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☑ No</td>
</tr>
<tr>
<td></td>
<td>☑ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</td>
</tr>
</tbody>
</table>

### Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

#### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</td>
<td>1500</td>
</tr>
<tr>
<td>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</td>
<td>1</td>
</tr>
<tr>
<td>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
</tr>
<tr>
<td>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
</tr>
<tr>
<td>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
</tr>
<tr>
<td>Question</td>
<td>Number</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</td>
<td>3</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</td>
<td>139</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</td>
<td>3</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</td>
<td>2</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</td>
<td>43</td>
</tr>
<tr>
<td>Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
</tr>
<tr>
<td>Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</td>
<td>There were no inmates placed in segregation for sexual victimization, nor were there blind, hard-of-hearing, or Deaf inmates in custody so these populations were substituted for the interview protocols with others who were gay, LEP or inmates who reported sexual abuse in custody, as the auditor and facility were able to identify them.</td>
</tr>
</tbody>
</table>

**Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit**

<table>
<thead>
<tr>
<th>Question</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</td>
<td>440</td>
</tr>
<tr>
<td>Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</td>
<td>20</td>
</tr>
<tr>
<td>Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</td>
<td>95</td>
</tr>
<tr>
<td>Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</td>
<td>The auditor obtained information from the facility throughout the onsite portion of the audit for specific categories of staff. The auditor asked the facility for staff of each of these categories so that specific interview protocols could be used on as many diverse staff as possible.</td>
</tr>
</tbody>
</table>

**INTERVIEWS**

**Inmate/Resident/Detainee Interviews**

**Random Inmate/Resident/Detainee Interviews**

<table>
<thead>
<tr>
<th>Question</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</td>
<td>20</td>
</tr>
</tbody>
</table>
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)

- Age
- Race
- Ethnicity (e.g., Hispanic, Non-Hispanic)
- Length of time in the facility
- Housing assignment
- Gender
- Other
- None

If “Other,” describe:

Work assignments, inmates in segregation for reasons other than sexual victimization risk.

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?

The auditor obtained an alpha-roster and an inmate housing roster from facility staff. The auditor first ensured each targeted inmate population was selected for interview, and then backfilled additional inmate interviews with random selections to complete the minimum interviews required by the PREA Auditor Handbook, plus 20 additional inmates for incidental refusals or unavailability. The auditor ensured inmates from each housing area were selected when backfilling interviewee selections, also giving consideration to inmate work assignments. The auditor then created an interview list organized by unit and housing that was presented to the facility to pull inmates for interview (which inmates were random and targeted were not disclosed). Some inmates who were selected at random or for targeted interviews were not available or declined interview, which is why there were at least 60 inmates selected for interview.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?

- Yes
- No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

The auditor focused on random inmate interviews in all housing areas, to include transient housing (inmates who only stayed at the facility for a few days, in transit to another facility or release). The auditor also focused random interviews with inmates who lived/worked in areas that had had more than one PREA allegation occur in the area of concern. There were no barriers to interviewing encountered by the auditor.

Targeted Inmate/Resident/Detainee Interviews

58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

25
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

### 60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:

<table>
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</table>

#### a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:

| Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. |
|☑️ The inmates/residents/detainees in this targeted category declined to be interviewed. |

#### b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The auditor made observations and requests for different populations of inmates in an attempt to gather these numbers and interviews with these inmates, but could not find additional inmates outside of what the facility was able to provide. The 1 inmate who was identified by the facility as disabled declined to be interviewed.

### 61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:

<table>
<thead>
<tr>
<th>0</th>
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</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

#### a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:

| ☑️ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. |
|☐ The inmates/residents/detainees in this targeted category declined to be interviewed. |

#### b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The auditor made observations and requests for different populations of inmates in an attempt to gather these numbers and interviews with these inmates, but could not find additional inmates outside of what the facility was able to provide.

### 62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:

<table>
<thead>
<tr>
<th>0</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

#### a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:

| ☑️ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. |
|☐ The inmates/residents/detainees in this targeted category declined to be interviewed. |
### b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The facility confirmed they do not normally house this population of inmates. The auditor made observations and requests for different populations of inmates in an attempt to gather these numbers and interviews with these inmates, but could not find additional inmates outside of what the facility was able to provide.

<table>
<thead>
<tr>
<th>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the &quot;Disabled and Limited English Proficient Inmates&quot; protocol:</th>
<th>0</th>
</tr>
</thead>
</table>

#### a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:

- ☑ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
- The inmates/residents/detainees in this targeted category declined to be interviewed.

### b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The facility confirmed they do not normally house this population of inmates. The auditor made observations and requests for different populations of inmates in an attempt to gather these numbers and interviews with these inmates, but could not find additional inmates outside of what the facility was able to provide.

| 64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol: | 2 |
| 65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol: | 14 |
| 66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol: | 2 |
| 67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol: | 2 |
| 68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol: | 3 |
| 69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Alleged to have Suffered Sexual Abuse)" protocol: | 0 |
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:

- Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
- The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

- The auditor interviewed 2 inmates who were in segregated housing for other reasons than sexual victimization risk to supplement for the facility not having any inmates in segregation for risk of sexual victimization. The auditor made observations and requests for different populations of inmates in an attempt to gather these numbers and interviews with these inmates, but could not find additional inmates outside of what the facility was able to provide.

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70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):

The auditor interviewed inmates who were in segregated housing for other reasons than sexual victimization risk to supplement for the facility not having any inmates in segregation for risk of sexual victimization. There were no inmates who were Deaf, hard of hearing, blind or who had low-vision assigned to the facility so the auditor oversampled inmates who had disclosed previous sexual victimization and inmates who identified as gay, lesbian or bisexual. The auditor also interviewed 3 inmates who had been named as perpetrators of sexual abuse in PREA incidents, however in all these inmate's cases, the findings had not been substantiated and, according to the documentation of those incidents, the facility could not consider them inmates who may be at risk of abusive behavior based on the evidence in those cases. There were no barriers to completing interviews.

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**Staff, Volunteer, and Contractor Interviews**

**Random Staff Interviews**

71. Enter the total number of RANDOM STAFF who were interviewed: 12

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)

- Length of tenure in the facility
- Shift assignment
- Work assignment
- Rank (or equivalent)
- Other (e.g., gender, race, ethnicity, languages spoken)
- None

If “Other,” describe: No text provided.

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?

- Yes
- No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

The auditor wanted to ensure different types of staff from all contracted agencies and the facility were interviewed, to include the draft interview protocols for staff in the kitchen, mailroom, laundry area, etc. Therefore the auditor only had 12 staff who were only interviewed with the random staff protocols. However, all staff were interviewed using the random staff protocols prior to interviewing specialized staff using the specialized interview protocols. When selecting random staff, the auditor interviewed staff of both genders and those with various tenure, to ensure the recently hired staff, and the staff who had been at the facility for a significant amount of time, had adequate PREA Training.

**Specialized Staff, Volunteers, and Contractor Interviews**

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

23

76. Were you able to interview the Agency Head?

☒ Yes  ☐ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes  ☐ No

78. Were you able to interview the PREA Coordinator?

☒ Yes  ☐ No

79. Were you able to interview the PREA Compliance Manager?

☒ Yes  ☐ No  ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)
80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff
- Other

If "Other," provide additional specialized staff roles interviewed:

The auditor also interviewed supervisors responsible for inmate disciplinary proceedings, and staff assigned to laundry, commissary, kitchen, mailroom and grievances. The auditor also had an informal interview with the facility's Office of Inspector General investigator and multiple informal conversations with the agency PREA Coordinator (in addition to a provided formal interview of the PREA Coordinator).

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?

- Yes
- No

a. Enter the total number of VOLUNTEERS who were interviewed:

1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)

☐ Education/programming
☐ Medical/dental
☐ Mental health/counseling
☒ Religious
☐ Other

82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?

☒ Yes
☐ No

a. Enter the total number of CONTRACTORS who were interviewed:

6

b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)

☐ Security/detention
☒ Education/programming
☒ Medical/dental
☐ Food service
☐ Maintenance/construction
☐ Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.

Many staff fell into multiple categories of specialized staff so the number reported here are just the number of specialized staff interviewed. Many staff were interviewed using multiple specialized staff interview protocols and draft interview protocols.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

☒ Yes
☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes
☐ No
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>88. Informal conversations with staff during the site review (encouraged, not required)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The facility does not utilize phones to report PREA allegations to the PREA Ombudsman and the facility does not have an agreement in place with a local rape crisis center or other entity outside the agency to take a report by phone. The auditor did ask inmates and staff how reports could be made while performing the site review and all gave examples of the following reporting mechanisms: telling staff, calling family to make a report, writing a grievance, or using the mail system. The auditor was able to interview the mail staff and grievance staff on this process, as well as random staff on the other processes for reporting. The auditor was also able to sit in on multiple inmate screening sessions and an inmate education session while onsite.

### Documentation Sampling

Where there is a collection of records to review—such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files—auditors must self-select for review a representative sample of each type of record.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The auditor utilized inmate interviews to provide the facility with an additional list of necessary documentation reviews for any areas that inmates and/or staff were unsure of receiving or claimed to have not received information/education/training to ensure they were given information/trained according to the PREA Standards. The auditor's interviews with inmates showed an overwhelming majority of inmates were aware of the PREA processes and reporting mechanisms. The auditor requested some inmates at random and some who could not recall education in interview with the auditor to ensure all inmate education was provided, and all screenings provided accurate follow-ups. For the other inmates who forgot or were unsure of information being given to them, the auditor confirmed they were provided the necessary PREA information and that the distribution of such was documented. The auditor also reviewed disciplinary files of inmates, as well as the randomly selected inmates in segregation (for reasons other than risk of sexual victimization) for consistent procedures regarding restrictive housing.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

<table>
<thead>
<tr>
<th>Incident Type</th>
<th># of sexual abuse allegations</th>
<th># of criminal investigations</th>
<th># of administrative investigations</th>
<th># of allegations that had both criminal and administrative investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>11</td>
<td>0</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>15</td>
<td>3</td>
<td>15</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>3</td>
<td>26</td>
<td>3</td>
</tr>
</tbody>
</table>

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

<table>
<thead>
<tr>
<th>Incident Type</th>
<th># of sexual harassment allegations</th>
<th># of criminal investigations</th>
<th># of administrative investigations</th>
<th># of allegations that had both criminal and administrative investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.
94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Referred for Prosecution</th>
<th>Indicted/Court Case Filed</th>
<th>Convicted/Adjudicated</th>
<th>Acquitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Unfounded</th>
<th>Unsubstantiated</th>
<th>Substantiated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>0</td>
<td>3</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>3</td>
<td>20</td>
<td>3</td>
</tr>
</tbody>
</table>

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Referred for Prosecution</th>
<th>Indicted/Court Case Filed</th>
<th>Convicted/Adjudicated</th>
<th>Acquitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Unfounded</th>
<th>Unsubstantiated</th>
<th>Substantiated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: 28
<table>
<thead>
<tr>
<th>Question</th>
<th>Option 1</th>
<th>Option 2</th>
<th>Option 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</td>
<td>□ Yes</td>
<td>□ No</td>
<td>□ NA (NA if you were unable to review any sexual abuse investigation files)</td>
</tr>
<tr>
<td>Inmate-on-inmate sexual abuse investigation files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</td>
<td>□ Yes</td>
<td>□ No</td>
<td>□ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</td>
<td>□ Yes</td>
<td>□ No</td>
<td>□ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse investigation files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</td>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</td>
<td>□ Yes</td>
<td>□ No</td>
<td>□ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</td>
<td>□ Yes</td>
<td>□ No</td>
<td>□ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td>Sexual Harassment Investigation Files Selected for Review</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?
- Yes
- No
- NA (NA if you were unable to review any sexual harassment investigation files)

**Inmate-on-inmate sexual harassment investigation files**

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: 0

109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?
- Yes
- No
- NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?
- Yes
- No
- NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

**Staff-on-inmate sexual harassment investigation files**

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: 2

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?
- Yes
- No
- NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?
- Yes
- No
- NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

The facility counts sexual harassment as a form of sexual abuse, so the facility's reported numbers equal 30 total sexual abuse cases, however, the auditor's count is 28 sexual abuse cases reviewed and 2 sexual harassment cases reviewed. The facility provided 2 cases for auditor review that showed staff indictment proceedings that occurred outside of the 12 month period proceeding the onsite audit.

**SUPPORT STAFF INFORMATION**
### DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

### Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

### AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

<table>
<thead>
<tr>
<th></th>
<th>The audited facility or its parent agency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</td>
</tr>
<tr>
<td></td>
<td>A third-party auditing entity (e.g., accreditation body, consulting firm)</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

| Identify the name of the third-party auditing entity | PREA Auditors of America |
### Standards

#### Auditor Overall Determination Definitions

- **Exceeds Standard**  
  (Substantially exceeds requirement of standard)

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

- **Does Not Meet Standard**  
  (requires corrective actions)

#### Auditor Discussion Instructions

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.
115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive ED-03.03 (rev. 4): Safe Prisons Program (09/17/2019)
- TDCJ Plane/Henley Complex Organizational Chart (01/24/2022)

Interviews:

- Warden
- Assistant Wardens
- PREA Coordinator (PREA Ombudsman)
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)

Site Review Observations:

- Informal interviews with staff and inmates

Findings (by provision):

115.11(a) Provision 115.11(a) states, “An agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.”

TDCJ Safe Prisons/PREA Plan (p. ii) states the Texas Department of Criminal Justice (TDCJ) has zero tolerance for all forms of sexual abuse and sexual harassment of offenders and TDCJ has a proactive approach concerning the detection, prevention, response, and punishment of sexual abuse, including consensual sexual contact while in TDCJ custody. The plan continues by listing that TDCJ shall establish a safe environment for staff and offenders, take immediate action to address protective needs of offenders who have been victimized, and make every attempt to preventing sexual abuse and sexual harassment of its offenders. The TDCJ Safe Prisons/PREA Plan (p.2-5) includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment as defined by PREA Standard §115.6.

The auditor interviewed the facility’s Warden, Assistant Wardens and designated PREA Compliance Manager concerning this provision who confirmed the sexual harassment and sexual abuse zero-tolerance policy is mandated by the agency. The leadership team has recently been assigned to the facility (within the last 6 months) and the PCM is also newly assigned to their role, but all were able to explain to the auditor that the safety of their inmates, staff and facility is of the utmost importance and they have been working very hard to ensure the PREA standards, and other policies and procedures, are complied with by all.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.11(b) Provision 115.11(b) states, “An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.”

TDCJ Policy BP-02.09 (rev. 2): Prison Rape Elimination Act Ombudsman Policy Statement (p.1) states TDCJ shall coordinate the TDCJ efforts to comply with the PREA Standards in all of its correctional and community residential facilities through a PREA Ombudsman and this person shall have sufficient time and authority to oversee the TDCJ’s policies related to eliminating offender sexual abuse and sexual harassment at its facilities and implementing the PREA standards. The policy further states the TDCJ PREA Ombudsman reports directly to the Texas Board of Criminal Justice (TBCJ), and therefore has sufficient authority as required by this provision. The auditor was provided with a TDCJ Organizational Structure Chart which showed the PREA Ombudsman reports directly to the Texas Board of Criminal Justice.

The auditor was provided a telephone interview with the PREA Ombudsman for TDCJ who states they report directly to the Board (TBCJ) and they also have help from many staff that enable them enough time to manage all the PREA related duties required by this provision.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.11(c)** Provision 115.11(c) states, “Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards.”

The TDCJ operates more than one facility and therefore requires a PREA Compliance Manager according to this provision.

TDCJ Safe Prisons/PREA Plan (p. 8) states each warden shall select a correctional officer with sufficient time and authority to perform the duties of the USPPM (Unit SAFE Prisons/PREA Manager). The facility provided the auditor with a TDCJ Plane/Henley Complex Organizational Chart which shows the Unit Safe Prison/PREA Manager reports directly under the facility Warden. The auditor learned that the current assigned PREA Compliance Manager is currently out on leave and will be retiring. The facility has placed a designated staff member in this assignment to ensure the facility’s efforts for PREA compliance are maintained and this person will remain in the PREA Compliance Manager role after the planned retirement of the other staff. The auditor learned in addition to this person, the facility has placed an administrative lieutenant with prior PREA Safe Prisons experience to assist the PCM with learning PREA compliance and standards during this transition. Both staff report directly to the facility Warden. The auditor found the administrative lieutenant and designated PCM to be very knowledgeable of their roles and duties, given the short time frame they have been assigned to the PREA Safe Prisons team. The auditor was also informed traditionally there are 4 staff assigned to the PREA Safe Prisons team, but 2 other positions have not yet been refilled after staff turnover at the facility. However, throughout the onsite audit phase, the auditor found the two staff currently assigned as administrative lieutenant and PCM were extremely efficient and resourceful, being able to continue in their PREA duties even throughout the course of the audit.

The auditor interviewed the facility’s Warden and designated PREA Compliance Manager who verified the PCM and the administrative lieutenant assisting the PCM report directly to the facility Warden. The designated PCM was able to provide thorough and correct PREA compliance procedures to the auditor for all areas of PREA compliance in which they have responsibility. The staff showed a positive attitude towards their new role and confirmed that it has been a busy transition period with the leadership change-over at the facility, but the facility Warden has been extremely generous in providing any additional resources needed to ensure the PCM has enough time and authority to perform their duties for PREA compliance.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Contract: Solicitation and Modification of Private Residential Reentry Centers Contracts
- TDCJ Contract: Solicitation and Modification of Private Transitional Treatment Centers Contracts
- TDCJ Contract: Solicitation and Modification of Secure Private Facilities Contracts
- Agency Response to PAQ

Interviews:

- Agency Contract Administrator

Findings (by provision):

115.12(a) Provision 115.12(a) states, “A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity’s obligation to adopt and comply with the PREA standards.”

In the Pre-Audit Questionnaire (PAQ), the agency informed the auditor it has 34 total contracts for the confinement of its inmates with private agencies and entities. The agency provided the auditor with 3 documents that served as contracts for all the agency's private residential reentry centers, transitional treatment centers and private facilities. Each entity listed in these documents has a representative from the private entity and a representative from TDCJ who signed the contract on various dates between 2019-2021, when each entered and/or renewed the contracts. In each of these contracts, a PREA provision is written which states within 12 months of the entity being awarded a contract with TDCJ, the entity shall obtain PREA Compliance.

115.12(b) Provision 115.12(b) states, “Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.”

In the PAQ, the agency informed the auditor that all the contracts referenced in the above provision requires the agency to monitor the contractor’s compliance to the PREA Standards. The agency provided the auditor with 3 documents that served as contracts for private residential reentry centers, transitional treatment centers and private facilities. These documents state the agency will maintain and ensure continuous compliance with the PREA standards after receiving the initial PREA compliance.

The auditor was provided a telephone interview with the TDCJ Agency Contract Administrator who stated PREA Compliance is required in all its contracted private entities. The administrator stated each facility has a full-time TDCJ employee who is responsible for on-site contract monitoring of no more than 3 contracted facilities. This is accomplished through unscheduled contract reviews for compliance at least monthly. The administrator also stated each private entity is either in current compliance or awaiting a scheduled audit.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:
The auditor recommends no corrective action.
115.13 Supervision and monitoring

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- American Corrections Association Accreditation Report of Plane-Henley Units (01/27/2020)
- TDCJ Henley State Jail Annual Staffing Plan Review, years 2019-2021
- TDCJ Henley State Jail Participation Statement (for Staffing Plan Review), years 2019-2021
- TDCJ Henley State Jail Staffing Plan (06/01/2021)
- TDCJ Henley State Jail Staffing Turnout Rosters (first, second, third shifts, 08/04/2021-08/28/2021)
- TDCJ Plane State Jail Annual Staffing Plan Review, years 2019-2021
- TDCJ Plane State Jail Participation Statement (for Staffing Plan Review), years 2019-2021
- TDCJ Plane State Jail Staffing Plan (06/29/2021)
- TDCJ Plane State Jail Staffing Turnout Rosters (first, second, third shifts, 12/01/2021-12/08/2021)
- TDCJ Policy AD-11.52 (rev. 6): Security Staffing (03/04/2016)
- TDCJ Policy PO-07.002 (rev. 10): Major of Correctional Officers (01/15/2018)
- TDCJ Policy PO-07.003 (rev. 10): Captain of Correctional Officers (01/15/2018)
- TDCJ Policy PO-07.004 (rev. 10): Lieutenant of Correctional Officers (01/15/2018)
- TDCJ Policy PO-07.005 (rev. 10): Sergeant of Correctional Officers (01/15/2018)
- TDCJ Standard Operating Procedure 08.01 (rev 3): Turnout Roster Management (04/2012)
- TDCJ Unannounced Rounds Logs 10/07/2021-01/13/2022
- Agency Response to PAQ

Interviews:

- Agency Head Representative
- Warden
- Assistant Wardens
- Intermediate or higher-level facility staff

Site Review Observations:

- Turnout shift rosters
- Unannounced rounds log
- Informal interviews with staff and inmates

Findings (by provision):

115.13(a) Provision 115.13(a) states, “The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.”

TDCJ Safe Prisons/PREA Plan (p. 10) states TDCJ shall ensure each unit develops, documents, and complies with a staffing plan that provides for adequate levels of staffing and where applicable, video monitoring, to protect offenders against sexual abuse. The staffing plan lists it will take into account (1)-(11) of this provision:

1. TDCJ Safe Prisons/PREA Plan (p. 10) states any judicial finding of inadequacy will be addressed in the staffing plan. The agency advised the auditor they have had no such findings of inadequacy.
2. TDCJ Safe Prisons/PREA Plan (p. 11) states any finding of inadequacy from Federal investigative agencies will be
addressed in the staffing plan. The agency advised the auditor they have had no such findings of inadequacy.

3. TDCJ Safe Prisons/PREA Plan (p. 10) states any finding of inadequacy from internal or external oversight bodies will be addressed in the staffing plan. The agency advised the auditor they have had no such findings of inadequacy.

4. TDCJ Policy AD-11.52 (rev. 6): Security Staffing (p. 2) states staffing levels and plans must be based on the design and mission of the facility. The agency informed the auditor in the PAQ that the facility has completed an American Corrections Association audit in the past three years. The auditor reviewed the ACA Accreditation Report from 2020 did not find any findings of inadequacy.

5. TDCJ Policy AD-11.52 (rev. 6): Security Staffing (p. 2) states staffing levels and plans must be based on the offender population and custody level.


7. TDCJ Standard Operating Procedure 08.01 (rev 3): Turnout Roster Management (p. 1) details how staff assignments should be made in accordance with operational needs and unit activities.

8. TDCJ Safe Prisons/PREA Plan (p. 11) states any local, state laws, regulations and rules will be addressed in the staffing plan.

9. TDCJ Policy AD-11.52 (rev. 6): Security Staffing (p. 1) states Security Operations staff shall collect relevant information from the agency safe prisons/ PREA compliance manager containing the prevalence of substantiated and unsubstantiated incidents of sexual abuse from the previous year for each facility under review. The auditor reviewed the 2020 ACA Accreditation Report which addresses correctional regulations and rules. The Plane/Henley Unit received 100% ACA Compliance in mandatory standards and 99.8% in non-mandatory standards in this report.

10. TDCJ Policy AD-11.52 (rev. 6): Security Staffing (p. 2-4) details many instances, to include use of overtime, staff training and other relevant factors that needed to be addressed for the TDCJ staffing plan.

11. TDCJ Standard Operating Procedure 08.06 (rev 1): Security Operations Annual Review of Turnout Rosters Procedures (p. 1-2) lists the type of posts staff may be assigned to and the type of priority each of these positions may have.

In the PAQ, the facility reported it has a capacity of 2512 inmates and the average daily number of inmates since its last PREA audit has been 1255 inmates (312 for the Henley State Jail and 943 for the Plane State Jail). The facility provided the auditor with the TDCJ Henley State Jail Staffing Plan (p. 3) which showed 15 security supervisors and 75 security staff (shift and non-shift positions) assigned and the TDCJ Plane State Jail Staffing Plan, which showed 25 security supervisors and 264 security staff positions assigned.

Throughout the onsite audit phase, the facility’s population averaged 1503 inmates (1007 for Plane and 496 for Henley).

The auditor witnessed multiple staff from the rank of Warden to Corrections Officer working all areas of the facility throughout the onsite audit phase, including into the night shifts. In all areas of the facility, unused closets and offices remained locked and staff ‘roved’ throughout the areas to ensure safety of the inmates and staff in areas that may be more secluded. In areas with blind spots, the auditor saw security mirrors in strategic placement to assist with visuals of these areas. The auditor learned that the designated PREA Compliance Manager had requested the addition of more mirrors in areas and reported that these additions were easily obtained and mounted when requested. The auditor was informed through informal interviews with staff that security visuals are required frequently throughout a shift to ensure areas with inmates are secure.

The auditor interviewed the Warden who confirmed the facility has a PREA compliant staffing plan that is followed. The Warden had recently been assigned to the unit but had studied the staffing plan upon placement over the facility. The Assistant Wardens also verified the facility’s staffing plan is followed and that no improvements had been identified upon their recent assignment to their positions.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.13(b) Provision 115.13(b) states, “In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.”

The facility provided the auditor with the TDCJ Safe Prisons/PREA Plan which states (p. 11) when the TDCJ staffing plan is not complied with, the unit shall document and justify such deviations. The TDCJ Policy AD-11.52 (rev. 6): Security Staffing (p. 1) defines a staff position deviation and then lists multiple instances where this type of staff position may be used, based on the facility need. This document details who may make changes to the staffing plan and why. Also, this document details how changes may be made and has a detailed form called the Idled Position or Position Deviation Form that requires in-depth explanation, and a multi-level approval process should any parts of the staffing plan need to be changed.

The facility reported to the auditor in the PAQ the most common reasons for deviations from the staffing plan included transports, hospital security, Constant Direct Observation (CDO, constant and direct observation of an inmate for security...
The auditor reviewed the TDCJ Plane/Henley Complex Turnout Shift Rosters for multiple days throughout August and December 2021 that were provided by the facility during the pre-onsite audit phase. The auditor also reviewed the shift rosters for the days while onsite at the facility. The rosters showed staff deviations were the result of staff call-ins and medical leaves (staff shortages).

The auditor was provided a telephone interview with a TDCJ Agency Head Representative who stated that staffing analyses are conducted as required by TDCJ policy and changes are made in response to the staffing analyses, as needed. The auditor interviewed the facility Warden. The Warden stated they check the turnout rosters weekly for staffing compliance and the Assistant Wardens monitor the staffing plans daily to ensure coverage for each shift and adequate documentation is used for any deviations.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.13(c) Provision 115.13(c) states, “Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility’s deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.”

The agency provided the auditor with the TDCJ Safe Prisons/PREA Plan (p. 11) which states each facility shall complete a staffing plan assessment whenever necessary but not less than once each year to determine if adjustments to the plan are needed as required by this provision. This document states the PREA Coordinator and the TDCJ SPPM (Unit Safe Prison/PREA Manager) will conduct this assessment.

The facility provided the auditor the TDCJ Plane and Henley State Jail Annual Staffing Plan Reviews and the TDCJ Plane and Henley State Jail Participation Statements. Both units’ plans showed minor formatting changes and reclassification title changes to civilian positions, but no major changes had been recorded in these documents. These reviews occurred on 04/16/2019, 08/12/2020, 06/14/2021 for both units by the previously assigned Warden and facility leadership.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative who stated enhancements to the facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.13(d) Provision 115.13(d) states, “Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.”

TDCJ: Safe Prisons/PREA Plan (p. 2) states security supervisors at each unit shall conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment and these rounds shall be conducted during all shifts in accordance with applicable post orders. In addition, this document prohibits staff from alerting others when these rounds are occurring, unless the announcements are related to the legitimate operational functions of the unit. TDCJ Policy PO-07.002 (rec. 10): Major of Correctional Officers (p. 2), TDCJ Policy PO-07.003 (rec. 10): Captain of Correctional Officers (p. 2), TDCJ Policy PO-07.004 (rec. 10): Lieutenant of Correctional Officers (p. 2) and TDCJ Policy PO-07.005 (rec. 10): Sergeant of Correctional Officers (p. 2) each direct the person of that rank to supervise correctional staff by frequently conducting and documenting unannounced inspections of all the buildings on the unit, perimeter, pickets, mobile patrol, back gate, offender housing and offender work areas. The facility provided the auditor with an Unannounced Rounds documentation log of rounds for October 2021 through mid-January 2022. The logs showed ranked staff from Sergeant through Warden performing “PREA Rounds” on many different shifts and days of the week, including weekends.

While onsite, the auditor witnessed rank from Sergeant through Warden conduct PREA rounds. The auditor also reviewed logs onsite during the site review that had recent “PREA Rounds” by Sergeants through Wardens listed for many days, including weekends, and throughout each shift.
The auditor was provided a telephone interview with a TDCJ Agency Head Representative who stated the TDCJ facilities are safe, even during COVID (global pandemic of the COVID-19 virus). Central staff are able to “walk and talk” at the institutional level in order to achieve this safety. The auditor interviewed intermediate and higher-ranking staff about their involvement in unannounced rounds. All staff confirmed they are required to perform “PREA Rounds” daily, multiple times during their shifts. The auditor verified with the staff that the rounds are performed at random and through different areas to keep staff from anticipating the rounds. Many staff also disclosed radio traffic monitoring was used to ensure the rounds are not announced by staff. Informal interviews with Corrections Officers and inmates confirmed they are accustomed to seeing the ranked staff in all areas of the facility.

The documents provided to the auditor and the encounters witnessed onsite show TDCJ has established a robust staffing plan that addresses every instance of staff and offender planning, positions, roster development and needs for its facility. The facility and agency policy requires staff in the rank of Sergeant (first line supervisor) and above (intermediate and higher-level supervisors) to perform unannounced rounds to deter sexual abuse and sexual harassment, which exceeds the standard. Staff confirmed this process in action onsite and in interview with the auditor.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility exceeds standards in this provision.

**Corrective Action:**

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.14</th>
<th>Youthful inmates</th>
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<tbody>
<tr>
<td><strong>Auditor Overall Determination:</strong></td>
<td>Meets Standard</td>
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<tr>
<td><strong>Auditor Discussion</strong></td>
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<td><strong>Documents Reviewed:</strong> (Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td>TDCJ Plane/Henley Complex Statement of Fact 115.14 (03/01/22)</td>
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<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<td><strong>Site Review Observations:</strong></td>
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<td>Daily population report for days of onsite audit</td>
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<tr>
<td><strong>Findings (by provision):</strong></td>
<td></td>
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<tr>
<td><strong>115.14(a)</strong> Provision 115.14(a) states, “A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.”</td>
<td></td>
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<tr>
<td>The agency advised the auditor in the PAQ and through the TDCJ Plane/Henley Complex Statement of Fact 115.14 that it does not house youthful inmates. The auditor confirmed this through interview with Classifications Staff and viewing the daily population reports during the onsite audit.</td>
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<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility audit.</td>
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<tr>
<td><strong>115.14(b)</strong> Provision 115.14(b) states, “In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.”</td>
<td></td>
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<tr>
<td>The agency advised the auditor in the PAQ and through the TDCJ Plane/Henley Complex Statement of Fact 115.14 that it does not house youthful inmates. The auditor confirmed this through interview with Classifications Staff and viewing the daily population reports during the onsite audit.</td>
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<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility audit.</td>
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<tr>
<td><strong>115.14(c)</strong> Provision 115.14(c) states, “Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.”</td>
<td></td>
</tr>
<tr>
<td>The agency advised the auditor in the PAQ and through the TDCJ Plane/Henley Complex Statement of Fact 115.14 that it does not house youthful inmates. The auditor confirmed this through interview with Classifications Staff and viewing the daily population reports during the onsite audit.</td>
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<tr>
<td><strong>Corrective Action:</strong></td>
<td></td>
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<tr>
<td>The auditor recommends no corrective action.</td>
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</table>
### 115.15 Limits to cross-gender viewing and searches

<table>
<thead>
<tr>
<th>Auditor Overall Determination: Exceeds Standard</th>
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<tr>
<td><strong>Auditor Discussion</strong></td>
</tr>
</tbody>
</table>

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Plane/Henley Complex Statement of Fact and Log 115.15 (01/31/2022)
- TDCJ Policy AD-03.22 (rev. 12): Offender Searches (06/17/2019)
- TDCJ Policy PO-07.006 (rev. 6): Administrative Segregation Officer (02/15/2016)
- TDCJ Policy PO-07.023 (rev. 13): Cellblock Officer (12/14/2018)
- TDCJ Policy PO-07.027 (rev. 10): Dorm Officer (12/14/2018)
- TDCJ Safe Prisons/PREA Operations Manual 2.05: Cross-Gender Searches and Log (02/2020)
- TDCJ Security Memorandum SM-02.25 (rev. 5): ON-THE-JOB Training Program (05/14/2018)
- TDCJ Supervisor Training Curricula Pre-Service (09/01/2020)
- TDCJ Supervisor Training Curricula Supervisor In-Service (09/01/2020)
- Agency Response to PAQ

**Interviews:**

- Random staff
- Random inmates
- Targeted inmates

**Site Review Observations:**

- Camera monitors
- Daily population report for onsite days
- Inmate areas outside of housing
- Inmate housing blocks
- Inmate showers
- Segregation cells
- Staff training files
- Informal interviews with staff and inmates

**Findings (by provision):**

**115.15(a)** Provision 115.15(a) states, “The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.”

TDCJ Safe Prisons/PREA Plan (p. 9) states staff shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners in accordance with TDCJ Policy AD-03.22: Offender Searches. TDCJ Policy AD-03.22: Offender Searches (p. 3-4) states body cavity searches shall only be performed by a medical practitioner.

In the PAQ, the facility reported it does not routinely perform cross-gender strip searches or cross-gender visual body cavity searches and no cross-gender strip or body cavity searches had been performed in the past 12 months. The agency provided the auditor with the Safe Prisons/PREA Program Cross-Gender Searches and Log for Fiscal Year 2021; the log had zero entries.

The auditor interviewed random security staff of both genders who confirmed that cross-gender strip searches do not occur at the facility, except in exigent circumstances. The staff verified that they do not perform body cavity searches.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.15(b)** Provision 115.15(b) states, “As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates’ access to regularly available programming or other out-of-cell...
opportunities in order to comply with this provision."

TDCJ Policy AD-03.22 (p. 3-4) states female offenders shall be pat searched by female staff. The agency informed the auditor in the PAQ it does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances and the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. The facility reported no pat-down searches of female inmates were conducted by male staff. The agency provided the auditor with the Safe Prisons/PREA Program Cross-Gender Searches and Log for Fiscal Year 2021; the log had zero entries.

The auditor witnessed corrections staff of both genders working all areas of the facility, to include work areas (commissary, maintenance, kitchen). Staff interviews verified female staff are always on duty and available to assist in searching female inmates and none had ever known of a male staff needing to perform clothed searches of female inmates, nor had they known of any restrictions placed on inmates due to lack of female staffing for searches. Random interviews with male officers confirmed they have never performed a clothed search of a female inmate, but all were able to describe how they had been taught to do so, if necessary in exigent circumstances, in a respectful and professional manner. The auditor interviewed random female inmates who also confirmed they had never been searched by a male officer and they had never experienced being restricted from out-of-cell opportunities due to lack of female staff availability for searches.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.15(c) Provision 115.15(c) states, “The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.”

TDCJ Safe Prisons/PREA Plan (p. 9) and TDCJ Policy AD-03.22: Offender Searches (p. 9) state all cross-gender strip searches shall be documented on an Inter-Office communication (IOC) containing a supervisor’s signed approval and filed with the Safe Prison/PREA Manager (SPPM). TDCJ Policy AD-03.22: Offender Searches (p. 3-4) states body cavity searches shall only be performed by a medical practitioner.

The agency provided the auditor with the TDCJ Plane/Henley Complex Statement of Fact along with the Safe Prisons/PREA Program Cross-Gender Searches and Log from Fiscal Year 2021. The log had no entries. The agency provided multiple curriculum documents detailing the training of staff and supervisors on cross-gender strip searches. Supervisor In-Service (p. 6) and Pre-Service training (p. 12) detail what type of searches would be cross-gender strip searches, explained exigent circumstances and cited the requirements of the above policies, specifically requiring exigent circumstances, supervisory approval, and IOC documentation if the cross-gender strip search is necessary. In addition, the agency provided the auditor with TDCJ Safe Prisons/PREA Operations Manual: Cross-Gender Searches and Log (p. 1-2) which details when and how to use the log if cross-gender searches occur. The manual requires the unit, fiscal year, page number, date of search, searching officers name and rank, searched offenders name and TDCJ number, supervisor approving name and rank, UOF or EAC number and date of IOC received by SPPM office.

The auditor interviewed random staff who stated they had never witnessed or known of a cross-gender search of a female inmate but were able to describe the agency policy concerning the need for documenting these searches should they be necessary.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.15(d) Provision 115.15(d) states, “The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.”

TDCJ Safe Prisons/PREA Plan (p. 9) and TDCJ Policy AD-03.22: Offender Searches (p. 9) state correctional officers shall make best efforts for all offenders to shower, perform bodily functions, and change clothing without staff of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks, which would then require staff of the opposite gender to announce their presence when entering an offender housing area. Supervisor In-Service (p. 5) training reiterates staff will practice the “knock and announce” procedure when entering inmate areas of opposite genders to ensure they are afforded privacy according to this provision. TDCJ Policy PO-07.006: Administrative Segregation Officer (p. 3), TDCJ Policy PO-07.023: Cellblock Officer (p. 2), and TDCJ Policy PO-07.027: Dorm Officer (p. 2) state the cellblock picket officer shall announce their presence when entering the cellblock if the officer is of the opposite gender of the offenders housed on the cellblock. This policy also states the cellblock picket officer shall ensure the verbal announcement is made any time the gender-supervisor of a cellblock changes from exclusively same gender to mixed or opposite gender-supervision.
The auditor witnessed implemented practices during the site review that allowed the female inmates to maintain privacy during showering, performing bodily functions and changing, as required by this provision. These included curtained, single-stalled showers, bathroom doors that covered a person from head to mid-calf, video camera positioning away from bathrooms and showers, and painted door windows to bathrooms outside of housing areas that covered a person from neck down. The auditor also witnessed ‘knock and announce’ painted on the doors into housing units throughout the facility. And the auditor heard loud and clear announcements by male and female staff to announce a male presence in the housing areas and work areas.

The auditor interviewed random staff and inmates who were unanimous in that male staff announce their presence in the housing and work areas, whenever present. The auditor confirmed even in areas outside of housing, the male staff announce themselves. Auditor interviews with male staff consistently showed these staff were adamant about giving female inmates privacy in these areas as the auditor had witnessed onsite.

The agency policy has a compliant requirement of providing inmates privacy to shower, bathe and change as required by this provision in housing areas. The facility has implemented an additional requirement for male staff to announce their presence in areas outside of housing areas to ensure females are given additional privacy in areas with inmate changing rooms and restrooms. The auditor witnessed this practice during the site review and confirmed it in interviews with inmates and staff. Announcing male presence in all areas of the facility exceeds this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility exceeds standards in this provision.

115.15(e) Provision 115.15(e) states, “The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.”

TDCJ Safe Prisons/PREA Plan (p. 9-10) states under no circumstances shall transgender or intersex inmates be searched solely for the purpose of determining an offender’s genital status. The plan continues that during intake, non-medical staff shall not search a transgender or intersex offender for the sole purpose of determining the offender’s genital status and if the genital status is unknown, it may be determined through conversations with the offender, reviewing medical records, or as part of a broader medical examination conducted in private by a medical practitioner. TDCJ Policy AD-03.22: Offender Searches (p. 2) states no search of a transgender or intersex offender shall be conducted for the sole purpose of determining the offender’s genital status.

The facility reported in the PAQ there had been no searches of transgender or intersex inmates by staff for the sole purpose of determining the inmate’s genital status.

The auditor interviewed random staff who confirmed searching a transgender or intersex inmate to determine genital status is prohibited. The auditor interviewed transgender inmates who verified they had never been searched in an attempt for their genital status to be determined and had only been searched for security, routine procedures.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.15(f) Provision 115.15(f) states, “The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.”

TDCJ Safe Prisons/PREA Plan (p. 33) states correctional staff shall be trained in the methods of conducting cross-gender, transgender and intersex offender pat-down searches in order to ensure the searches are conducted professionally and respectfully, in the least intrusive manner possible, but with attention to security needs. TDCJ Training and Leader Development Division Correctional Training and On-the-Job Training Program Procedure Guide (p. 41-45) details the steps of pat-searching male, female and transgender and intersex inmates by same gender and opposite gender staff. The guide also directs staff of the opposite gender be able to successfully explain the steps of a cross-gender search in case the opposite gender staff is required to perform a search of an inmate. The guide gives step-by-step instructions for each type of search and what type of body, body/head/face hair, clothing, and special circumstances each type of inmate may have and how they may be professionally and respectfully searched by staff in the least intrusive manner possible but within security needs.

The facility reported in the PAQ 100 percent of its security staff had received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional manner, as required by this provision.

The auditor interviewed random staff who were able to describe to the auditor the training they had received by explaining the process of conducting searches of transgender and intersex inmates by using the ‘back side of bladed hands’ over
Sensitive areas (breasts and/or groin). The auditors interviews with transgender inmates also supported that staff perform professional and respectful searches of this population.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Inmates with disabilities and inmates who are limited English proficient

**Audit Overall Determination:** Meets Standard

**Audit Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Correctional Managed Health Care Policy Manual A-08.03: Referral of Offenders to the Developmental Disabilities Program (DDP) (08/28/2019)
- Correctional Managed Health Care Policy Manual G-51.1: Offenders with Special Needs (03/07/2017)
- Language Assessment Scales and Test for Spanish Interpreters
- Qualified Spanish Interpreters List for Plane Henley units (03/03/2022)
- TDCJ Administrative Directive AD-04.25 (rev. 5): Language Assistance Services to Offenders Identified as Monolingual Spanish-Speaking (08/25/2016)
- TDCJ CID Intake Procedures 6.05: Intake Processing of Inmates in Need of an Interpreter (08/2020)
- TDCJ Offender Orientation, Safe Prisons in Texas Video Script (English and Spanish)
- TDCJ Safe Prisons/PREA Operations Manual 2.03: Safe Prisons/PREA Program Postings and Brochures (02/2020)
- TDCJ Security Memorandum S M-05.50 (rev. 4): Qualified Spanish Interpreter Guidelines (02/15/2019)
- UTMB Correctional Managed Care: Language Line Solutions Quick Reference Guides to Access an Interpreter

**Interviews:**

- Random staff
- Targeted inmates

**Site Review Observations:**

- Posted PREA information
- Facility qualified Spanish interpreter
- Informal interviews with staff and inmates

**Findings (by provision):**

**115.16(a)** Provision 115.16(a) states, “The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164.”

TDCJ Safe Prisons/PREA Plan (p. 20) states appropriate steps shall be taken to ensure offenders with disabilities (including deaf, hard of hearing, blind, low vision, intellectual, psychiatric or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of TDCJ efforts to prevent, detect and respond to sexual abuse and sexual harassment. The plan states this will be accomplished through qualified interpreters, when necessary, and written materials shall be provided to ensure effective communication with offenders with disabilities, limited reading skills or who are blind or have low vision.

TDCJ Intake Procedures 6.05: Intake Processing of Inmates in Need of an Interpreter (p. 1) details how an interpreter may provide interpretation services should such an offender be transferred to a facility. Correctional Managed Health Care Policy Manual G-51.1: Offenders with Special Needs (p. 2) states interpreters will be provided to offenders whose primary means of communication is ASL or finger spelling. The policy also states once per month, a list of offenders that require Certified ASL interpretation will be established to assist in communication needs with these offenders. CMCH Policy Manual G-51.1 (p.2) states any offender that is suspected or diagnosed with special needs, including vision disabilities, should be referred to the appropriate program and/or service. Correctional Managed Health Care Policy Manual A-08.03: Referral of Offenders to the Developmental Disabilities Program (DDP) (p. 1-3) lists offenders suspected or diagnosed with having an intellectual disability will be referred to the Developmental Disabilities Program (DDP) and these referrals begin a process of providing
The auditor interviewed random staff who all were aware of the ability of interpretation services to be provided for any routine this provision.

The facility informed the auditor in the PAQ there had been no instances where inmate interpreters were used as detailed in offender’s safety.

readers of other types of offender assistants except in limited circumstances, where an extended delay could compromise the TDCJ Safe Prisons/PREA Plan (p. 20-21) states when seeking interpreters, staff shall not rely on offender interpreters, allegations.

compromise the inmate’s safety, the performance of first-response duties under § 115.64, or the investigation of the inmate’s in inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could 115.16(c)

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.16(b) Provision 115.16(b) states, “The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.”

TDCJ Safe Prisons/PREA Plan (p. 20-21) states offenders with limited English Proficiency (LEP) shall be provided meaningful access to information regarding TDCJ efforts to prevent detect and respond to sexual abuse and sexual harassment, including steps to provide interpreters as required by this provision. TDCJ Intake Procedures 6.05: Intake Processing of Inmates in Need of an Interpreter (p. 1) states non-English speaking inmates who need an interpreter may have on-site interpretation or may obtain an interpreter to meet the need through the Intake Administrator who can acquire one through various interpretation services and locations for a variety of languages. TDCJ Administrative Directive AD-04.25: Language Assistance Services to Offenders Identified as Monolingual Spanish-Speaking (p. 1-3) states TDCJ ensures language assistance services are provided to eligible offenders during intake and throughout their incarceration, as necessary. TDCJ Security Memorandum S M-05.50 (rev. 4): Qualified Spanish Interpreter Guidelines (02/15/2019) (p. 1-6) details the use of Spanish qualified unit interpreters, the qualification process, formal and informal uses of interpretation, spoken and written interpretation services, and what offender services can be utilized for each. The facility informed the auditor that it has multiple Spanish-speaking staff working TDCJ and provided the auditor with a list of the Plane/Henley Complex staff who could provide this service; there were 9 facility staff with various job titles listed as qualified Spanish interpreters. Additionally, the agency provided the auditor with the Language Assessment Scales and Test for Spanish Interpreters in which these staff undergo to become Spanish-speaking certified staff. The auditor utilized a qualified Spanish interpreter during inmate interviews and the inmates were able to understand and communicate effectively to the auditor using this staff. The agency provided the auditor with a list of TDCJ Staff throughout the state who speak a language other than English or Spanish. The list provided 30 other languages spoken by these staff. In addition, the facility provided the auditor with information on a Language Line in which TDCJ contracts for additional interpretation services, if needed.

The auditor interviewed inmates who were limited English proficient and they verified the facility had provided adequate interpretation services in-person and through documents/video in a language in which they understood.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.16(c) Provision 115.16(c) states, “The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under § 115.64, or the investigation of the inmate’s allegations.”

TDCJ Safe Prisons/PREA Plan (p. 20-21) states when seeking interpreters, staff shall not rely on offender interpreters, readers of other types of offender assistants except in limited circumstances, where an extended delay could compromise the offender’s safety.

The facility informed the auditor in the PAQ there had been no instances where inmate interpreters were used as detailed in this provision.

The auditor interviewed random staff who all were aware of the ability of interpretation services to be provided for any routine
or emergency procedures with an inmate who was limited English proficient. They also verified they would never use an
inmate interpreter to assist in communication during first-response, as required by this provision, unless a circumstance
arose that would compromise an inmate's safety.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

TDCJ Safe Prisons/PREA Plan (02/2019)
Example of Verification of Former Employee
TDCJ Applicant Criminal Background Checks Procedure (08/2018)
TDCJ Executive Directive PD-27 (rev. 6): Employment Status Pending Resolution of Criminal Charges or Protective Orders (08/01/2015)
TDCJ Executive Directive PD-56 (rev. 7): Request for and Release of Employment Information or Documents (06/01/2017)
TDCJ Executive Directive PD-75 (rev. 8): Applicants with Pending Criminal Charges of Prior Criminal Convictions (04/01/2017)
TDCJ PERS 282 Employment Application Supplement (07/2019)
TDCJ PERS 598 Employment Application Supplement for Agency Applicants (02/2019)
TDCJ Plane/Henley Complex List of New Hires between 02/01/2021-01/31/2022
Agency Response to PAQ

Interviews:

Administrative (human resources) staff

Site Review Observations:

Personnel records
Programs staff clearances

Findings (by provision):

115.17(a) Provision 115.17(a) states, “The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lookup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.”

TDCJ Safe Prisons/PREA Plan (p. 37-38) and TDCJ Executive Directive PD-75 (rev. 8): Applicants with Pending Criminal Charges of Prior Criminal Convictions (p. 5) state TDCJ shall not hire or promote anyone who may have contact with offenders and shall not enlist the services of any contractor who may have contact with offenders who have engaged in sexual abuse, been convicted of engaging or attempting to engage in sexual activity or has been civilly or administratively adjudicated to have engaged in such as required by this provision.  TDCJ Executive Directive PD-73: Selection Criteria for Correctional Officer Applicants (p. 4) states any applicant for TDCJ employment shall not be on community supervision, including deferred adjudication, have any pending charges or outstanding warrants for any criminal offense.

The auditor was provided a list of the last 12 months’ hired staff which showed the date of employment and that a background check had been completed prior to that staff’s hiring, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.17(b) Provision 115.17(b) states, “The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.”

TDCJ Safe Prisons/PREA Plan (p. 37-38) and TDCJ Executive Directive PD-75 (rev. 8): Applicants with Pending Criminal Charges of Prior Criminal Convictions (p. 5) require TDCJ to consider any incidents of sexual harassment in determining whether to hire or promote an individual who may have contact with offenders. The agency provided the auditor with the TDCJ Employment Application Supplement form which requires the applicants to disclose if they have had involvement as described in this provision.
The auditor was provided information from TDCJ Human Resources staff who perform background checks on staff, and they explained all applicant previous employers are contacted and any reference to prior incidents of sexual harassment are taken into consideration and may make the applicant ineligible for employment.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.17(c)** Provision 115.17(c) states, “Before hiring new employees who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.”

TDCJ Safe Prisons/PREA Plan (p. 39) states TDCJ shall perform criminal background checks and attempts to contact previous institutional employers for information, and this is performed on all potential employees who may have contact with inmates as required by this provision. TDCJ Executive Directive PD-71: Selection System Procedures (p. 26) details the process of obtaining a criminal record check for corrections positions. TDCJ Executive Directive PD-27 (rev. 6): Employment Status Pending Resolution of Criminal Charges or Protective Orders (p. 1-3) explain how applicant’s fingerprints and annual background checks are performed by TDCJ regarding any applicant’s arrest, warrant of arrest, criminal charge filing or protective order filing as respondent. The agency provided the auditor with the TDCJ Employment Application Supplement form which requires applicants to disclose if they have had involvement as described in this provision. The agency also gave the auditor copies of applicant FACT Clearinghouse submissions (a database that provides criminal history), and verification of former employee forms that would provide the agency with the needed information on an applicant or contractor to ensure none with the listed disqualifications are hired for services. As part of the selection process, the staff stated TDCJ asks all applicants to list all previous employers. For all positions listed, applicants are asked their reason for leaving and whether they have ever been fired or asked to resign.

The agency gave the auditor copies of applicant FACT Clearinghouse submissions (a database that provides criminal history, examples had CJIS and III redacted), and verification of former employee forms that would provide the agency with the needed information on an applicant or contractor to ensure none with the listed disqualifications are hired for services.

The agency reported in the PAQ there had been 110 persons hired in the past 12 months who may have contact with inmates who have had criminal background checks performed. The auditor was provided a list of the last 12 months’ hired staff which showed the date of employment and that a background check had been completed prior to hiring, as required by this provision.

The auditor was provided information from TDCJ Human Resources staff who perform background checks on staff and contractors who explained all staff have initial criminal background checks performed regardless of whether they have contact with offenders. The staff confirmed in these checks, any reference to prior incidents of sexual harassment or abuse is taken into consideration and may make the applicant ineligible for employment.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.17(d)** Provision 115.17(d) states, “The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.”

TDCJ Safe Prisons/PREA Plan (p. 37-38) and TDCJ Executive Directive PD-75 (rev. 8): Applicants with Pending Criminal Charges of Prior Criminal Convictions (p. 5) require that TDCJ will consider any incidents of sexual harassment in determining whether to enlist in the services of any contractor who may have contact with offenders.

The agency provided the auditor with the TDCJ Employment Application Supplement form and the TDCJ Employment Application Supplement for Agency Applicants which requires applicants to disclose if they have had involvement described in this provision. The agency also provided copies of applicant FACT Clearinghouse submissions that would provide the agency with the needed information on a contractor to ensure none are enlisted for services as prohibited by this provision.

The agency reported it had hired 3 contracts for services where criminal background checks were conducted on contract staff who might have contact with inmates. The auditor was provided information from TDCJ Human Resources staff who perform background checks on staff who explained all contractors have initial criminal history checks and that DPS provides criminal activity reports for any contract staff after the initial check is performed. The auditor was provided a list containing all contract staff for programs staff which showed the date that each staff member was cleared through backgrounds.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.17(e)** Provision 115.17(e) states, “The agency shall either conduct criminal background records checks at least every
five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise
capturing such information for current employees."

TDCJ Safe Prisons/PREA Plan (p. 39) states criminal background checks shall either be conducted at least every 5 years for
current employees and contractors who may have contact with inmates or TDCJ shall have a system in place to otherwise
attain the information. TDCJ Executive Directive PD-27 (rev. 6): Employment Status Pending Resolution of Criminal Charges
or Protective Orders (p. 2-3) direct a semi-annual background check be performed on all employees on their birth month and
then again 180 days later. Additionally, this document describes that TDCJ staff and contract staff are enrolled in the FACT
Clearinghouse through Texas DPS which provides automatic notifications to TDCJ of employee arrests through
TCIC/NCIC/FBI RAP.

The auditor was provided information from TDCJ Human Resources staff who perform background checks on staff who
confirmed the practice for all staff and contractors as required by this provision and that DPS will immediately provide an
automatic notification to TDCJ by e-mail of any new criminal activity on the part of an employee.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

115.17(f) Provision 115.17(f) states, “The agency shall ask all applicants and employees who may have contact with inmates
directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or
promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency
shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.”

TDCJ Safe Prisons/PREA Plan (p. 38) states TDCJ shall directly ask all applicants and employees about previous
misconduct as described in this standard in written self-evaluations during employee reviews and additionally, employees
have a continuing affirmative duty to disclose to TDCJ knowledge of any such misconduct. TDCJ Executive Directive PD-27
(rev. 6): Employment Status Pending Resolution of Criminal Charges or Protective Orders (p. 1-3) requires TDCJ employees
to notify TDCJ upon any arrest, warrant of arrest, criminal charge filing or protective order filing as respondent.

The auditor was provided information from TDCJ Human Resources staff who perform background checks who confirmed
the above executive orders are in practice for all staff and contractors as required by this provision. The staff confirmed
TDCJ asks all applicants to list all previous employers. For all positions listed, applicants are asked their reason for leaving
and whether they have ever been fired or asked to resign.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

115.17(g) Provision 115.17(g) states, “Material omissions regarding such misconduct, or the provision of materially false
information, shall be grounds for termination.”

TDCJ Safe Prisons/PREA Plan (p. 38) states material omissions regarding misconduct about this standard, or the provision
of materially false information, shall be grounds for termination. The agency provided the auditor with the TDCJ Employment
Application Supplement form and the TDCJ Employment Application Supplement for Agency Applicants which necessitate
the applicants to disclose information as required by this standard. Each form has a Conditions of Employment section that
states any determination that the application has been falsified is grounds for refusing TDCJ employment or terminating
employment if already employed.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

115.17(h) Provision 115.17(h) states, “Unless prohibited by law, the agency shall provide information on substantiated
allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional
employer for whom such employee has applied to work.”

TDCJ Safe Prisons/PREA Plan (p. 39) states unless prohibited by law, information shall be provided on substantiated
allegations of sexual abuse or sexual harassment involving a former employee after receiving a request from an institutional
employer for whom the employee has applied to work.

The auditor was provided information from TDCJ Human Resources staff who perform background checks who confirmed
this would be disclosed as requested and provided to the employer by the TDCJ Office of Inspector General.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

Corrective Action:

The auditor recommends no corrective action.
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<td>Findings (by provision):</td>
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<tr>
<td><strong>115.18 (a)</strong></td>
<td>Provision 115.18(a) states, “When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse.”</td>
</tr>
<tr>
<td>The agency informed the auditor it has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since its last PREA Audit. The auditor made observations onsite and confirmed this to be true.</td>
<td></td>
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<tr>
<td>The auditor learned in interview with the Warden that they had requested established video monitoring equipment be upgraded and made in working order (some cameras had been down) however the facility is having issues with receiving parts due to shipping delays throughout the nation in the year of the audit (COVID-19 pandemic was still occurring at the time of the audit).</td>
<td></td>
</tr>
<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility audit.</td>
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<tr>
<td><strong>115.18 (b)</strong></td>
<td>Provision 115.18(b) states, “When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse.”</td>
</tr>
<tr>
<td>The agency informed the auditor it has not installed or updated a video monitoring system, electronic surveillance system or other monitoring technology since its last PREA Audit. The auditor made observations onsite and confirmed this to be true.</td>
<td></td>
</tr>
<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility audit.</td>
<td><strong>Corrective Action:</strong></td>
</tr>
<tr>
<td>The auditor recommends no corrective action.</td>
<td></td>
</tr>
</tbody>
</table>
Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- OIG Operational Procedures Manual OIG-04.05: Offender Sexual Assault Investigations (11/19/2019)
- TDCJ Email Communications between SPPMO and Rape Crisis Center (07/18/2021-03/07/2022)
- TDCJ Plane/Henley Complex List of Offender Victim Representatives (05/01/2019)
- TDCJ Policy AD-16.03 (rev. 5): Evidence Handling (05/28/2019)
- TDCJ Safe Prisons/PREA Operations Manual 05.01: Sexual Abuse Response and Investigation (02/2020)
- TDCJ SPPMO Curricula: Offender Victim Representative Training and Handouts
- TDCJ Statement of Fact 115.21 (10/18/2021)
- Agency Response to PAQ

Interviews:

- Designated PREA Compliance Manager (Unit Safe Prisons/PREA Manager)
- Offender Victim Representative
- Facility investigators
- Medical staff
- Mental Health staff
- Random staff
- Targeted inmates

Site Review Observations:

- PREA case files

Findings (by provision):

115.21(a) Provision 115.21(a) states, “To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.”

The facility advised the auditor in the PAQ the facility is only responsible for conducting administrative sexual abuse investigations. The Office of Inspector General (OIG) is responsible for conducting some administrative and all criminal sexual abuse investigations.

TDCJ Safe Prisons/PREA Plan (p. 15) states all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. TDCJ Policy AD-16.03: Evidence Handling (p. 2-4) details the steps TDCJ staff are required to take concerning identifying, preserving, chain of custody, gathering, labeling, and storing various types of evidence that may be involved in a sexual abuse crime scene. These steps describe a uniform evidence protocol with sufficient technical detail for obtaining usable physical evidence for administrative proceedings. OIG Operational Procedures Manual OIG-04.05: Offender Sexual Assault Investigations (p. 11-13) also detail a uniform evidence protocol with technical detail for gathering and preserving usable physical evidence for criminal prosecutions.

The auditor reviewed the facility’s PREA investigations and confirmed all reports followed a uniform evidence protocol and all alleged inmate victims, and staff and inmate alleged abusers were requested/directed to take similar processes for securing evidence based on the type of evidence at hand.

The auditor interviewed the facility’s investigators who verified they are required to secure and/or collect evidence depending on the allegation; the OIG may collect evidence for criminal cases. Random staff were interviewed who verified they have been trained in securing evidence and chain of custody for evidence, when required, and their primary role is securing the scene and securing physical evidence on the alleged victim/abuser for future collection by the facility’s designated investigators and/or OIG.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.
115. 21 (b) Provision 115.21(b) states, “The protocol shall be developmentally appropriate for youth where applicable, and as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011.”

In the PAQ, the agency advised the auditor the facility does not house youthful inmates, which the auditor confirmed onsite through observations and inmate rosters/files. TDCJ Safe Prisons/PREA Plan (p. 15, 25) states the uniform evidence protocol shall be developmentally appropriate for youth, where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of US Department of Justice Office on Violence against Women publication, as required by this provision. OIG Operational Procedures Manual OIG-04.05: Offender Sexual Assault Investigations (p. 3) states the policy complies with the DOJ-Office of Violence Against Women publication.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 21 (c) Provision 115.21(c) states, “The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentially or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.”

TDCJ Safe Prisons/PREA Plan (p. 13) states TDCJ shall offer all offender victims of sexual abuse access to forensic medical examinations with a sexual assault nurse examiner (SANE) when possible and if neither a SANE or sexual assault forensic exam (SAFE) is available, the examination may be performed by other qualified medical practitioners. The plan specifies the treatment shall be provided to the offender victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident. The plan states efforts to provide a SAFE or SANE shall be documented. The facility informed the auditor in the PAQ that these examinations would occur at a local hospital emergency department and that emergency room staff are either qualified as SANE or have specialized training to complete these exams per Texas law. This policy also specifies the efforts for a SAFE/SANE shall be documented.

In the PAQ, the facility reported there had been 2 forensic medical exams conducted in the past 12 months and these were performed by a SANE. The auditor reviewed the cases in which a forensic exam had been conducted and documented, showing the inmate victim was given a SAFE (at a local hospital, by hospital SANE) as required by this provision. The auditor reviewed the medical documentation for these incidents, along with inmate fund accounts and confirmed these procedures were offered to the inmates without financial cost.

The auditor interviewed the facility’s medical and mental health staff, and facility investigators. Medical and Mental Health staff confirmed they provide immediate triage for the inmates at the facility and then refer the inmate victims to local area hospital SANE staff for a SAFE procedure, as necessary. Medical staff confirmed all procedures for sexual abuse or sexual harassment response would be free of cost to the inmate.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 21 (d) Provision 115.21(d) states, “The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.”

The agency informed the auditor in the PAQ a memorandum of understanding between TDCJ and a rape crisis center has been attempted, but the arrangement has not been finalized. The agency provided multiple communications showing the agency’s attempt to provide a victim advocate as required, however, at the time of this audit, the agreement had not been established (TDCJ Statement of Fact 115.21, signed by TDCJ Ombudsman 10/18/2021). TDCJ Safe Prisons/PREA Operations Manual: Offender Victim Representative (p. 1) states a victim advocate from a rape crisis will be provided to an offender victim of sexual assault when available and that when one is not available, TDCJ shall provide an Offender Victim Representative (OVR) to provide emotional support, crisis intervention, information and referrals during and after the investigation. The facility provided the auditor with the TDCJ Plane/Henley Complex List of Offender Victim Representatives which showed the staff names and associated training these staff received specific to their qualifications to serve the facility in this capacity.
The auditor reviewed the investigation files of the facility. All cases had been referred to the OIG for possible criminal investigation. The auditor was informed in the PAQ that the OIG may provide criminal investigations for the facility for sexual abuse allegations. The TDCJ Safe Prisons/PREA Plan (p. 27) states that administrative and criminal investigations shall be completed for all allegations of sexual abuse and sexual harassment. The auditor interviewed the facility’s designated PREA Compliance Manager and administrative investigators who verified the case files by the facility and assigned investigator.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.21 (e)** Provision 115.21(e) states, “As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigator interviews and shall provide emotional support, crisis intervention, information, and referrals.”

The facility provided the auditor with the TDCJ Plane/Henley Complex List of Offender Victim Representatives which showed the staff names and associated training these staff received specific to their qualifications to serve the facility in this capacity. The auditor reviewed the PREA investigation cases provided by the facility. For all incidents of sexual abuse and sexual harassment allegations, the facility had offered an OVR, TAASA brochure and mental health referrals for additional victim assistance.

The facility reported 2 cases of alleged sexual abuse in the past 12 months in which a victim advocate/Offender Victim Representative was offered to both inmates, but one inmate declined this service. The auditor also reviewed other investigations files for sexual abuse cases that did not allege penetration and the facility had offered the inmate victim an Offender Victim Representative for each incident, including allegations of sexual harassment.

The facility’s designated PREA Compliance Manager confirmed the agency has attempted to secure a rape crisis center agreement for the facility and has been close to success on this recently, but at the time of the audit, the agreement had yet to be finalized. The designated PCM verified Offender Victim Representatives are staffed at the facility to serve as a victim advocate for inmate victims until such a time that the agreement for a rape crisis center can be finalized. The auditor also interviewed a qualified staff member who serves as an OVR for the facility. The staff confirmed they had received special training for this service and have been requested occasionally to serve in this capacity.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.21 (f)** Provision 115.21(f) states, “To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.”

The auditor interviewed the facility’s designated PREA Compliance Manager and administrative investigators who verified the procedure for any sexual abuse or sexual harassment response would include the offering of an Offender Victim Representative who would then be allowed to accompany and support the inmate victim throughout the investigation and evidence collection processes, as requested by the inmate victim. The auditor also interviewed inmates who reported sexual abuse to the facility and while their allegations had not required a SAFE, both inmates confirmed that an OVR was offered to provide emotional support, crisis intervention, information, and referrals.

The facility reported 2 cases of alleged sexual abuse in the past 12 months had required a SAFE as required by policy and this provision. In these incidents, the facility offered the OVR, but only 1 of the 2 inmate victims had utilized the service. This was documented in the case files by the facility and assigned investigator.

The auditor interviewed the facility’s designated PREA Compliance Manager and administrative investigators who verified the procedure for any sexual abuse or sexual harassment response would include the offering of an Offender Victim Representative who would then be allowed to accompany and support the inmate victim throughout the investigation and evidence collection processes, as requested by the inmate victim. The auditor also interviewed inmates who reported sexual abuse to the facility and while their allegations had not required a SAFE, both inmates confirmed that an OVR was offered to provide emotional support, crisis intervention, information, and referrals.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**TDCJ Board Policy BP-1.07:** Inspector General Policy Statement (p. 2) states the OIG has the authority and responsibility to ensure continuous, timely and responsive cooperation with all divisions of TDCJ concerning sexual abuse investigations. TDCJ Safe Prisons/PREA Plan (p. 27) states administrative and criminal investigations shall be completed for all allegations of sexual abuse and sexual harassment.

The auditor was informed in the PAQ that the OIG may provide criminal investigations for the facility for sexual abuse allegations. The auditor reviewed the facility’s investigation files. All cases had been referred to the OIG for possible criminal investigations. The auditor interviewed a staff member who serves as an OVR for the facility. The staff confirmed they had received special training for this service and have been requested occasionally to serve in this capacity.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.21 (f)** Provision 115.21(f) states, “To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.”
investigation, as required by agency policy. The OIG then advised the facility which cases required criminal investigation and those that had, were conducted by the OIG as agency policy dictates. The other cases were investigated by facility investigators. All cases reviewed and provided to the auditor showed evidence as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 21 (h) Provision 115.21(h) states, "For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general."

TDCJ Safe Prisons/PREA Operations Manual: Offender Victim Representative (p. 1) states a victim advocate from a rape crisis will be provided to an offender victim of sexual assault when available and that when one is not available, TDCJ shall provide an Offender Victim Representative (OVR) to provide emotional support, crisis intervention, information, and referrals during and after the investigation. The manual details each unit warden shall designate two of the following personnel to serve in this role: Mental Health Practitioners, Sociologists, Chaplains, Social Workers, and Case Managers. The agency also provided the auditor with extensive training to include the TDCJ SPPMO Curricula: Offender Victim Representative Training and corresponding TDCJ SPPMO Handout #1 for the OVR designees that qualify the OVRs to perform in their capacity.

The facility provided the list of Offender Victim Representatives that represent the complex, and all had been selected based on the appropriateness to serve in this role.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
Policies to ensure referrals of allegations for investigations

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Findings (by provision):

115.22(a) Provision 115.22(a) states, “The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.”

TDCJ Safe Prisons/PREA Plan (p. 27) states administrative and criminal investigations shall be completed for all allegations of sexual abuse and sexual harassment. The auditor was informed in the PAQ the OIG may provide criminal investigations for the facility for sexual abuse allegations and the facility provides administrative investigations for sexual abuse and sexual harassment allegations. TDCJ Board Policy BP-1.07: Inspector General Policy Statement (p. 1) states, in accordance with Texas Government Code § 493.019, the OIG is the primary investigative and law enforcement entity for TDCJ.

The facility reported in the PAQ there had been 28 allegations of sexual abuse and/or sexual harassment in the past 12 months that had resulted in 28 administrative and criminal investigations. The auditor was given clarification that all cases are reviewed by the OIG for criminal aspects, but not all cases necessitate a criminal investigation. The auditor reviewed the completed cases and concluded the cases were thoroughly investigated and completed within appropriate times and included all required elements according to the PREA Standards. The facility reported in the PAQ 4 cases had not yet been completed and is still pending with the OIG. The auditor learned onsite that 2 of the 4 open OIG cases had been completed and there were currently 2 cases pending OIG completion during the onsite audit phase.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative who stated criminal and administrative investigations are conducted as required by TDCJ policy and the procedures for those investigations are outlined in these policies. The auditor confirmed this process with the facility’s Warden and designated PREA Compliance Manager. The auditor was also provided an informal interview with the facility’s designated OIG investigator who verified the investigation practices and cooperation between their agency and the facility were within the requirements of the PREA standards.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.22(b) Provision 115.22(b) states, “The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.”

TDCJ Safe Prisons/PREA Plan (p. 27) states allegations of sexual abuse and sexual harassment shall be referred to the OIG
for investigation. These referrals shall be documented on the appropriate investigative forms contained within AD-02.15,
“Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incident” for staff-on-offender
allegations and the SPPOM for offender-on-offender allegations. TDCJ Policy AD-02.15: Operations of the Emergency
Action Center and Reporting Procedure for Serious or Unusual Incidents (p. 1) states the Emergency Action Center (EAC) is
responsible for receiving all reports of serious or unusual incidents, notifying appropriate entities and administrative staff of
serious or unusual incidents, maintaining custody of all records relating to these incidents, preparing monthly audit reports,
and providing Executive Services with the information to publish statistical reports. This policy then details sexual abuse and
sexual harassment definitions according to the PREA Standards. TDCJ Policy AD-16.20 (rev. 4): Reporting
Incidents/Crimes to the Office of Inspector General (p. 3-4) defines the procedures for supervisors in the facility to refer
incidents requiring OIG investigations. These incidents include all sexual abuse and sexual harassment investigations
according to this policy. The auditor reviewed the TDCJ website: https://www.tdcj.texas.gov/tbcj/prea.html. At this site, the
TDCJ Policy for sexual abuse and sexual harassment investigations is listed as being investigated by the OIG.

The auditor reviewed the PREA case files for the facility and found all cases had been referred to the OIG, per agency policy,
and those that did not involve OIG involvement (non-internal affairs and/or criminal cases) were referred back to the facility
for an administrative investigation. All cases reviewed by the auditor had been fully investigated criminally, administratively,
or both, as required by this provision and agency policy.

The auditor interviewed the facility’s administrative investigators and informally interviewed the facility’s designated OIG
investigator. All confirmed the policies and practices are in place and executed to ensure sexual abuse and sexual
harassment allegations are thoroughly investigated, as required.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

115.22(c) Provision 115.22(a) states, “If a separate entity is responsible for conducting criminal investigations, such
publication shall describe the responsibilities of both the agency and the investigating entity.”

The auditor reviewed the TDCJ website: https://www.tdcj.texas.gov/tbcj/prea.html. At this site, the TDCJ Policy for sexual
abuse and sexual harassment investigations are given to the PREA Ombudsman Office for investigation and response. The
site also states cases are referred to the OIG for possible criminal investigation.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant
with this provision.

Corrective Action:

The auditor recommends no corrective action.
115.31 Employee training

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**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (03/01/2017)
- TDCJ Executive Directive PD-97 (rev. 7): Training and Staff Development (06/01/2017)
- TDCJ PERS 632 Employee Acknowledgement Form (06/2017)
- TDCJ Safe Prisons/PREA in Texas Training Video Script: Educational DVD for staff, volunteers, and contractors (08/05/2013)
- TDCJ Safe Prisons/PREA Operations Manual 06.01: Unit Safe Prisons/PREA Program Awareness Training (February 2020)
- TDCJ Security Memorandum SM-02.25 (rev. 5): ON-THE-JOB Training Program (05/14/2018)
- Training Lesson Plans
- Agency Response to PAQ

**Interviews:**

- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager) who performs intake and comprehensive inmate education
- Random staff

**Site Review Observations:**

- Employee training files

**Findings (by provision):**

115.31(a) Provision 115.31(a) states, “The agency shall train all employees who may have contact with inmates on: (1) its zero-tolerance policy for sexual abuse and sexual harassment; (2) how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) inmates’ right to be free from sexual abuse and sexual harassment; (4) the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) the dynamics of sexual abuse and sexual harassment in confinement; (6) the common reactions of sexual abuse and sexual harassment victims; (7) how to detect and respond to signs of threatened and actual sexual abuse; (8) how to avoid inappropriate relationships with inmates; (9) how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.”

The TDCJ Safe Prisons/PREA Plan (p. 33-34) and the TDCJ Safe Prisons/PREA Operations Manual 06.01: Unit Safe Prisons/PREA Program Awareness Training (p. 1-2) state USPPM shall ensure all unit staff are knowledgeable of the agency zero-tolerance policy regarding sexual abuse and sexual harassment and lists all the provisions required by this standard (1-10). TDCJ Executive Directive PD-97: Training and Staff Development (p. 12) states all staff shall receive Safe Prisons/PREA Training by viewing the PREA in Texas training video and completing the PERS 632 Safe Prisons/PREA Training Employee Acknowledgement form after viewing the video. The auditor was provided a copy of this form.

The agency provided the auditor with Correctional Training and Staff Development lesson plans for the following: Safe Prisons Module: Sexual Abuse/Assault, OJT Program-Peer Acceptance, Correctional Awareness-Staff Survivor, Non-Supervisor In-Service, Supervisor In-Service, Pre-Service and the Safe Prisons PREA in Texas video script. All the training lesson plans and items showed detailed educational information required by this provision.

The auditor was provided staff training files during the pre-onsite audit phase and the auditor also requested selected staff files to review onsite. All files reviewed showed evidence that staff are trained as required by this provision.

The auditor interviewed random staff at the facility, and all were knowledgeable of the zero-tolerance against sexual abuse and sexual harassment policies. The auditor requested staff to give examples of the different aspects of the training they had received, and all were able to provide the auditors with these examples, showing evidence the staff had been trained and
understood the items required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.31(b) Provision 115.31(b) states, “Such training shall be tailored to the gender of the inmates at the employee’s facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.”

In the PAQ, the facility informed the auditor that it houses female offenders, and both male and female staff work in the unit.

The TDCJ Safe Prisons/PREA Plan (p. 34) states the training shall be tailored to the gender of the offenders at the unit of assignment and the employee shall receive additional training when transferring to a unit with offenders of a different gender. TDCJ Security Memorandum SM-02.25: ON-THE-JOB Training Program (p. 17) states a 12-hour gender specific training course will be conducted for those employees that will be assigned to a unit that houses female offenders. Also, if an employee transfers to a unit that houses female offenders, the employee shall be required to take this course prior to being assigned a shift or department. The auditor reviewed the training lesson plans provided by the facility which discussed in detail gender specific topics for male and female staff working male and/or female units.

The auditor interviewed many male and female staff who had been reassigned from a male unit to the Plane/Henley Complex. All staff verified they had received gender-specific training prior to being assigned within the complex. The auditor also interviewed supervisory staff who confirmed they provide additional mentoring to staff on how to work in a female unit with many specifying the goal is to ensure staff understand the importance of maintaining professional relationships with inmates.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.31(c) Provision 115.31(c) states, “All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency’s current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.”

The TDCJ Safe Prisons/PREA Plan (p. 34) states all employees who have contact with offenders, including medical and mental health practitioners, shall receive training at least every two years and in interim years, employees shall be provided refresher information on current sexual abuse and sexual harassment policies.

In the PAQ, the facility informed the auditor, concerning PREA training, that it trains its staff at least annually in addition to refresher information that is given during shift turnout.

The facility’s designated PREA Compliance Manager informed the auditor that since their appointment in the section at the beginning of the year, they have focused on staff training during turnouts on a frequent basis, many times a month and on all shifts to ensure staff are given refresher training on the agency’s PREA policies. The designated PCM was able to provide the auditor with staff training logs throughout the last 12 months in addition to what was provided in the PAQ.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.31(d) Provision 115.31(d) states, “The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.”

TDCJ Executive Directive PD-97 (rev. 7): Training and Staff Development (p. 12) states all staff shall receive Safe Prisons/PREA Training by viewing the PREA in Texas training video and completing the PERS 632 Safe Prisons/PREA Training Employee Acknowledgement form after viewing the video. The auditor was provided a copy of this form.

The auditor reviewed staff training logs pre-onsite and onsite that confirmed this training was provided as indicated in the Policy, to include agency and contract staff. All staff training logs reviewed showed at least biannual training (every 2 years). The agency requires in-service training yearly, however, due to the COVID Pandemic, the agency had limited in-person staff contact and had to cancel some in-service trainings the previous year. Since the agency had required yearly training prior to the pandemic, and had restarted in-service training in late 2021, the staff files reviewed by the auditor showed that no staff had missed the biannual training required by this provision. The facility’s designated PREA Compliance Manager also provided the auditor with staff training logs that documented the refresher trainings received at the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.
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<th>Corrective Action:</th>
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<td>The auditor recommends no corrective action.</td>
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## Volunteer and contractor training

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<th>Auditor Overall Determination: Meets Standard</th>
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**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Office of Inspector General, University of Texas Medical Branch NEO
- TDCJ Handbook for Volunteers (01/2018)
- TDCJ PERS 631 PREA Form: Standard or Supplemental Safe Prisons/PREA Training Contract Employee or Intern Acknowledgment Form
- TDCJ Statement of Fact 115.32
- TDCJ Volunteer Services Acknowledgement of Volunteer Training/Orientation, Appendix F (01/2015)
- TDCJ Volunteer Services Training Plans and Packets (05/05/2015)
- TDCJ Windham Annual Security Training (08/01/2021)
- University of Texas Medical Branch Training Lesson Plans and Packets
- Agency Response to PAQ

**Interviews:**

- Contractors who may have contact with inmates
- Volunteers who may have contact with inmates

**Site Review Observations:**

- Contractor training files
- Volunteer training files

**Findings (by provision):**

### 115.32(a)

Provision 115.32(a) states, “The agency shall 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 and procedures.”

The auditor was informed by the agency in the PAQ that it contracts for medical, mental health services, and programs/education services.

TDCJ Safe Prisons/PREA Plan (p. 35) states all volunteers and contractors who have contact with offenders shall be trained regarding sexual abuse and sexual harassment prevention, detection, and response policies and procedures in accordance with the TDCJ Volunteer Services Plan, PD-29, “Sexual Misconduct with Offenders,” and this TDCJ Safe Prisons/PREA plan. The agency provided the auditor with multiple training curriculum from TDCJ, and the contract agencies employed by the agency. All training curriculum reviewed thoroughly addressed PREA provisions and the zero-tolerance, response and detection expected of the contract and volunteer staff that work in the facilities. The agency advised the auditor in the TDCJ Statement of Fact 115.32 that due to the COVID pandemic, all training has been conducted online. The auditor was provided an example of the online training which was as equally informative as the in-person training curriculum.

The facility reported 94 volunteers and contractors who may have contact with inmates have been trained in the agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The auditor provided the training files on the facility’s volunteers and contractors which shows the training received, date of the training and the employee’s verification of the training receipt by signature.

The auditor interviewed medical and mental health staff and program/education contract staff. All confirmed they received training through their agency and through the facility regarding the agency’s PREA policies. All staff interviewed were able to adequately describe their abilities and responsibilities for preventing, detecting, and responding to sexual abuse and sexual harassment. Many staff confirmed the training received was at the onset of services for the facility but also at least annually.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

### 115.32(b)

Provision 115.32(b) states, “The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and
informed how to report such incidents."

TDCJ Safe Prisons/PREA Plan (p. 35) states the level and type of training provided to volunteers and contractors shall be specific to the services provided and the level of contact with offenders. The facility provided the auditor with multiple training resources, including lesson plans, handbooks and other training material concerning TDCJ services and PREA requirements according to the standard for University of Texas Medical Branch Training Lesson Plans and Packets and TDCJ Volunteer Services. All training documents listed TDCJ’s zero-tolerance policy concerning sexual abuse and sexual harassment. Also, the training documents each went into great detail on what level of response and responsibility each has regarding reporting and responding to incidents of sexual abuse and sexual harassment, as required by this provision.

The auditor interviewed contract medical and mental health staff as well as contract program and education staff. The medical and mental health staff also provided the auditor service-specific aspects of their training, based on their duties at the facility. The volunteers interviewed stated they also received initial PREA training and may receive updates from the facility, as the facility necessitates.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.32(c) Provision 115.32(c) states, “The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.”

TDCJ Safe Prisons/PREA Plan (p. 35) states documentation of these trainings for the volunteers and contractors shall be kept and maintained by TDCJ. TDCJ PERS 631 Standard or Supplemental Safe Prisons/PREA Training Contract Employee or Intern Acknowledgement Form and the TDCJ Volunteer Services Acknowledgement of Volunteer Training/Orientations, Appendix F Form are the documents utilized by the facility for documenting volunteer and contractor training. Appendix F states the person signing the form has been fully advised of and clearly understands PREA and the TDCJ zero-tolerance for sexual misconduct and then specifies the reporting requirements of volunteer staff. PERS 631 states the person signing the form acknowledges they have attended the Safe Prisons/PREA training, including viewing the Safe Prisons/PREA training video.

The auditor reviewed the training files provided by the facility during the onsite audit phase. The auditor compared the files provided to the rosters of contract staff and volunteer list. All contract staff and volunteers had completed PREA training as required.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Correctional Managed Health Care Policy Manual A-08.03: Referral of Offenders to the Developmental Disabilities Program (DDP) (08/28/2019)
- Correctional Managed Health Care Policy Manual G-51.01: Offenders with Special Needs (03/07/2017)
- Correctional Managed Health Care Policy Manual G-51.1: Offenders with Special Needs (03/07/2017)
- List of Staff who Speak Language Other than English or Spanish (04/2018)
- Qualified Spanish Interpreters for Plane/Henley Complex
- TDCJ Administrative Directive AD-04.25 (rev. 5): Language Assistance Services to Offenders Identified as Monolingual Spanish-Speaking (08/25/2016)
- TDCJ Administrative Directive AD-06.25 (rev. 4): Qualified Interpreter Services – American Sign Language (04/10/2015)
- TDCJ Disciplinary Rules and Procedures for Offenders in English and Spanish (08/2019)
- TDCJ Offender Orientation Handbook (02/2017)
- TDCJ Offender Orientation Video transcript
- TDCJ Safe Prisons/PREA Operations Manual 2.03: Safe Prisons/PREA Program Postings and Brochures (02/2020)
- TDCJ Safe Prisons/PREA Operations Manual 6.02: Offender Sexual Abuse Awareness Training (02/2020)
- TDCJ UNIT Classification Procedure 5.00: Orientation Procedures (04/2017)
- TDCJ Unit Orientation Plane Unit Booklet
- Agency Response to PAQ

Interviews:

- Intake staff (Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager))
- Random staff
- Random inmates
- Targeted inmates

Site Review Observations:

- Inmate education documentation (SAFE Prisons/PREA Automated Network System (SPPANS))
- Inmate intake/education process
- Posted PREA information
- Unit Orientation Packet
- Informal interviews with staff and inmates

Findings (by provision):

115.33(a) Provision 115.33(a) states, “During the intake process, inmates shall receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.”

TDCJ Safe Prisons/PREA Plan (p. 32) and the TDCJ Offender Handbook (p. 2) states during the intake process, offenders shall be provided with educational information explaining the TDCJ’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The auditor was informed the incoming inmates into the facility receive the Offender Handbook prior to being housed in the facility.

In the PAQ, the facility reported 5476 inmates had been admitted during the past 12 months who were given information at intake, and this was 100 percent of the inmates who had been admitted to the facility. The auditor learned that the facility is a release and transfer hub for the agency, so many of the population received at the facility do not stay housed at the facility for more than 1-3 days, awaiting transfer or release. The facility staff informed the auditor that no matter their length of stay, all inmates receive the agency’s PREA information as required by this provision.

The auditor witnessed an incoming transfer of inmates into the Plane Unit. The inmates had received an Orientation packet which contained the TDCJ Offender Orientation Handbook, TDCJ Unit Orientation Plane Unit Booklet, TDCJ Disciplinary Rules and Procedures for Offenders in English and Spanish and a pamphlet on how to use the inmate phones. There was
also posted PREA information throughout the intake area. All of these items contained information on what PREA is, and how to make a report as required by this provision.

The auditor interviewed random inmates who confirmed they had received the agency’s zero-tolerance policy on sexual abuse and sexual harassment and how to make a report when they entered the facility’s custody. The auditor ensured inmates who were only in temporary transient housing (being moved from one agency facility to another and only on the unit for 1-3 days) were included in those inmates interviewed about this provision. Transferring inmates as well as long-term resident inmates confirmed they had received the initial PREA information as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.33(b) Provision 115.33(b) states, “Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.”

TDCJ Safe Prisons/PREA Plan (p. 32) states within 30 days of intake, the USPPM shall ensure offenders are provided with comprehensive education either in person or through video regarding their rights to be free from sexual abuse and sexual harassment, and any retaliation for reporting these incidents, and regarding TDCJ policies and procedures for responding to these incidents in accordance with the SPPOM.

In the PAQ, the facility reported 3204 inmates had been admitted during the past 12 months who were given comprehensive education within 30 days of arrival, according to this requirement and that this was 100 percent of the inmates at the facility who had stayed 30 days or more at the Plane/Henley Complex.

The auditor witnessed an incoming transfer of inmates into the Plane Unit. The inmates were watching the TDCJ Safe Prisons/PREA Orientation video which serves as comprehensive education for the unit. An officer was present to answer questions. The auditor witnessed the video in English and confirmed with the inmates present that all understood English and the video information. After reviewing the video, the inmates were screened by the designated PREA Compliance Manager who also confirmed each inmate had watched and understood the video in the intake area. The auditor also witnessed each of the inmates had received an Orientation packet which contained information on PREA.

The auditor interviewed the facility's designated PREA Compliance Manager who confirmed each inmate who transfers to the unit, regardless of the length of stay, will go through the intake process, receiving the comprehensive PREA information that the auditor had witnessed. The auditor interviewed random and targeted inmates who confirmed they had received information through the PREA video played at intake with many explaining the PREA video is played on a daily basis in the units and they know the information from the video very well.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.33(c) Provision 115.33(c) states, “Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility.”

In the PAQ, the facility reported current inmates who had not received such education according to this standard were educated within 30 days of their arrival at the facility.

The auditor was provided the TDCJ Safe Prisons/PREA Operations Manual 6.02: Offender Sexual Abuse Awareness Training (p. 1) onsite which states the Offender Sexual Abuse/PREA Awareness Video (TDCJ Orientation Video) shall be provided in English and Spanish [and/or] USPPM shall ensure presentation of the video in the language format appropriate for offender needs. The facility also provided the auditor with the TDCJ Offender Orientation Handbook which is provided to inmates as part of the PREA education session. Both were available in English and Spanish. The auditor confirmed the availability of both languages were available onsite for all PREA written information and through video.

The designated PREA Compliance Manager confirmed all inmates who enter the facility that have not been given PREA education would be educated within 30 days as required by this provision. The PCM stated the inmates are given PREA education within a weeks’ time, in most instances. The auditor confirmed this reported timeline when reviewing the intake documents for the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.33(d) Provision 115.33(d) states, “The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who
In the PAQ, the facility informed the auditor it can provide interpretation services to inmates who are limited English proficient, deaf, visually impaired, disabled, or who have limited reading skills.

The agency provided the auditor with TDCJ Security Memorandum S M-05.50: Qualified Spanish Interpreter Guidelines (p. 5) which states an interpreter who is familiar with terminology specific to the specialty area subject (like PREA) shall be used to provide communication. For Deaf and hard of hearing inmates, Correctional Managed Health Care Policy Manual G-51.5: Interpreter Services – Certified American Sign Language (ASL) Interpreter Services (p.1) specifies ASL interpreters may be provided by notifying Assistive Disability Service Department. Correctional Managed Health Care Policy Manual G-51.01: Offenders with Special Needs (p.1) states offenders with special needs for disabilities may contact TDCJ Health Services Division to provide assistance services for offenders. TDCJ Administrative Directive AD-04.25: Language Assistance Services to Offenders Identified as Monolingual Spanish-Speaking (p. 1-3) states TDCJ ensures language assistance services are provided to eligible offenders throughout their incarceration, as necessary. TDCJ Security Memorandum SM-05.50: Qualified Spanish Interpreter Guidelines (p. 1-6) detail the use of Spanish qualified unit interpreters, the qualification process, formal and informal uses of interpretation, spoken and written interpretation services, and what offender services can be utilized for each. TDCJ Safe Prisons/PREA Operations Manual 6.02: Offender Sexual Abuse Awareness Training (p. 1) states the Offender Sexual Abuse/PREA Awareness Video (TDCJ Orientation Video) shall be provided in English and Spanish [and/or] USPPM shall ensure presentation of the video in the language format appropriate for offender needs. The facility provided the auditor with the TDCJ Offender Orientation Video transcript and TDCJ Offender Orientation Handbook that are provided to inmates as part of the PREA education session. Both were available in English and Spanish.

The agency provided the auditor with a list of TDCJ Staff who speak a language other than English or Spanish. The list provided 30 other languages spoken by these staff. The agency also gave the auditor a list of Qualified Spanish Interpreters for the Plane/Henley Complex, showing 9 staff that specifically work the facility who have been certified to interpret Spanish.

The auditor confirmed the availability of education materials in both English and Spanish while onsite and in the intake area, as well as other posted documents throughout the facility.

The auditor interviewed the facility’s designated PREA Compliance Manager who verified the availability of translation services can be utilized to assist the PREA education process for inmates. The designated PCM stated any other communication needs would be addressed by them in cooperation with medical and/or mental health staff, as necessary. The auditor interviewed random staff who confirmed they were aware of the availability of translators for staff to utilize. The auditor interviewed inmates who were limited English proficient and they also gave evidence they had received inmate education materials and assistance in a language they understood (Spanish).

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.33(e) Provision 115.33(e) states, “The agency shall maintain documentation of inmate participation in these education sessions.”

TDCJ Safe Prisons/PREA Operations Manual 6.02: Offender Sexual Abuse Awareness Training (p. 1) states USPPM shall ensure each offender signs an attendance roster at the time of training and the PCM retains copies of each roster for 3 fiscal years plus current year. The auditor received the Safe Prisons/PREA Program Offender Sexual Abuse Awareness Education/ Cold and Heat Weather Training Offender Suicide Prevention Training Sign-in Roster. This roster is where inmates sign confirming review of the PREA training video and/or in-person prevention class. The facility provided the auditor with completed rosters to review. The inmates who had arrived at the facility had signed the form and the PREA Compliance Manager had initialed that the information was provided as required. The auditor requested additional documentation while onsite for inmates who could not recall education during interview with the auditor. The facility was able to provide the auditor with all the education documentation for these inmates as requested.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.33(f) Provision 115.33(f) states, “In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.”

TDCJ Safe Prisons/PREA Operations Manual 2.03: Safe Prisons/PREA Program Postings and Brochures (p. 1) states in addition to other education, the USPPM shall ensure key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. This will be done with posters throughout the unit, including in staff and offender work areas. The Zero-Tolerance Policy poster, Sexual Abuse and Sexual Harassment and Extortion Posters, and Sexual Abuse Awareness Brochure are the required materials per this manual and were provided to the auditor for review. TDCJ Executive Directive ED-02.10 (rev. 2): Prison Rape Elimination Act Complaints and Inquiries (p. 4) states a posting providing information about PREA and how to contact the PREA ombudsman shall be posted and made
continually and readily available and visible to the offender population at each correctional facility. The posting is then attached in both English and Spanish.

The auditor informally asked inmates on the site review if they had such information on hand and all confirmed that had the written information in handbooks and brochures. The auditor witnessed PREA Signage throughout all areas of the facility, including work, programs, housing, visitation, and staff areas. Each area also had bulletin boards which posted more reporting mechanism and the PREA Audit Notice.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
### Specialized training: Investigations

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<th>Auditor Overall Determination:</th>
<th>Meets Standard</th>
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#### Auditor Discussion

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- OIG Training Roster
- OIG Training Section Lesson Plan 2029: Interview and Interrogation (07/15/2013)
- OIG Training Section Lesson Plan 3201: Sexual Assault Investigative Topics (06/2011)
- TDCJ Correctional Training and Staff Development Lesson Plan SPPCTI: Conducting a Thorough Investigation (09/01/2019)
- TDCJ Correctional Training and Staff Development Presentation SPPCTI: Conducting a Thorough Investigation

**Agency Response to PAQ**

**Interviews:**

- Facility investigators

**Site Review Observations:**

- Investigator training files
- PREA case files

**Findings (by provision):**

**115.34(a)** Provision 115.34(a) states, “In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.”

TDCJ Safe Prisons/PREA Plan (p. 26) states investigations involving allegations of sexual abuse shall be conducted by investigators who have received special training in sexual abuse investigations pursuant to this plan. The agency provided the auditor with the OIG Training Section Lesson Plan: Interview and Interrogation and OIG Training Section Lesson Plan 3201: Sexual Assault Investigative Topics. Both lesson plans were extensive in describing the specificities of conducting sexual abuse investigations in a confinement setting. Topics included in-depth coverage of types of sexual abuse and how they may develop in confinement coupled with best practices for interviewing victims to obtain the most evidence possible to provide justice, and what type of evidence can be expected in these cases. The training included practical scenarios and examples of how to deal with common situations as a sexual abuse investigator. The training also went into a systematic overview of what to expect of the Sexual Assault Forensic Exam as an investigator overseeing the procedure. TDCJ Correctional Training and Staff Development Presentation SPPCTI: Conducting a Thorough Investigation was also provided to the auditor. In this training, the student is given training specific to confinement settings and how and why that is different from traditional investigations outside of confinement. And the agency provided the auditor with TDCJ Correctional Training and Staff Development Lesson Plan SPPCTI: Conducting a Thorough Investigation which details to facility administrative investigator’s sexual abuse investigation training as required by this standard.

In the PAQ, the auditor was informed the facility has 31 investigators for administrative investigations and all 31 investigators had received training, as required by this provision. The auditor verified the training was received by reviewing the training logs of these staff.

The auditor interviewed the facility’s investigators who confirmed they had received training specific to conducting investigations in confinement settings.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.34(b)** Provision 115.34(b) states, “Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.”

The facility provided the auditor with the OIG Training Section Lesson Plan 2029: Interview and Interrogation which detailed interviewing techniques, to include Miranda and Garrity Warning, evidence collection and evidence criteria as required by this provision. The lesson plan, consistent with the training in the above provision, was very detailed, giving specific examples...
and best practices of all subjects required by this specific provision. The TDCJ Correctional Training and Staff Development Lesson Plan SPPCTI: Conducting a Thorough Investigation also details the required aspects of the specialized training for facility administrative investigators.

The auditor reviewed the facility’s PREA investigations which showed evidence the investigators had received training specific to this provision because the reports listed evidence collection requirements and outlined the criteria used to correctly conclude an administrative case as unsubstantiated, substantiated, or unfounded.

The auditor interviewed the administrative investigators for the facility who were able to provide the auditor examples and definitions for the training aspects, showing evidence as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.34(c) Provision 115.34(c) states, “The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.”

OIG 2013 Operations Procedures Manual OIG-02.15: Training Procedures (p. 4) states The Training Department is responsible for documenting and maintaining the Agency’s official training records for all personnel. The auditor received a log of OIG staff training that recorded the OIG investigator’s attendance and grade for the National Institute of Corrections PREA Investigation Training.

For the facility’s administrative investigators, the auditor received documentation of every investigator’s training, as required by agency policy and this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
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<th>115.35</th>
<th>Specialized training: Medical and mental health care</th>
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<td><strong>Auditor Overall Determination:</strong></td>
<td>Meets Standard</td>
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**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Office of Inspector General, University of Texas Medical Branch NEO
- TDCJ Executive Directive ED-97 (rev. 7): Training and Staff Development (06/01/2017)
- Agency Response to PAQ

**Interviews:**

- Medical staff
- Mental Health staff

**Site Review Observations:**

- Medical staff training files

**Findings (by provision):**

**115.35(a)** Provision 115.35(a) states, "The agency shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment."

TDCJ Executive Directive ED-97: Training and Staff Development (P. 12) states all unit assigned contract employees and interns shall report to the USPPM for PREA training and this training shall consist of viewing the Safe Prisons/PREA in Texas Training video. The TDCJ Statement of Fact 115.35 directs the medical staff employed or contracted who work in the facility shall be trained in the requirements as specified in this provision. Correctional Managed Health Care Policy Manual C-25.1: Orientation Training for Health Services Staff (p. 1) states health services personnel within TDCJ shall receive training as required by this provision. Office of Inspector General, University of Texas Medical Branch NEO (p. 1-6) gives detail to UTMB contract medical staff to detect and assess signs of sexual abuse and sexual harassment. The document gives directive and procedures for preserving evidence, and how to report allegations as required by this provision.

The facility reported 46 medical and mental health care practitioners work regularly at the facility and have received training required by policy. The auditor was provided the medical training files for all 46 medical and mental health care practitioners.

The auditor interviewed the facility’s medical and mental health care staff during the onsite audit phase. All confirmed they had been trained in the general PREA topics required by contractors but were also given specialized training specific to their roles in medical and mental health work. The staff confirmed this training occurs upon hiring by their agency and also annually thereafter.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.35(b)** Provision 115.35(b) states, “If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.”

In the PAQ, the facility reported medical staff do not conduct forensic examinations; these are conducted offsite by hospital staff.

The auditor interviewed medical staff who confirmed they do not conduct forensic exams, but the staff were aware of how to respond to these incidents and provide triage until the sexual abuse victim may be seen at the hospital for the SAFE.

Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility audit.

**115.35(c)** Provision 115.35(c) states, “The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.”
TDCJ Executive Directive ED-97: Training and Staff Development (P. 12) states all unit assigned contract employees and interns shall document their PREA training in the Safe Prisons/PREA Training Contract Employee or Intern Form.

The facility reported 46 medical and mental health care practitioners work regularly at the facility and have received training required by policy. The auditor was provided the medical training files for all medical and mental health care practitioners.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.35(d) Provision 115.35(d) states, “Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner’s status at the agency.”

TDCJ Executive Directive ED-97: Training and Staff Development (P. 12) states all unit assigned contract employees and interns shall report to the USPPM for PREA training.

The auditor confirmed 46 medical and mental health staff had received training as documented in the TDCJ Standard or Supplemental Safe Prisons/PREA Training Contract Employee or Intern Acknowledgment Form. The staff signature on this form shows acknowledgement that the employee or intern has attended standard and/or supplemental Safe Prisons/PREA Training provided by TDCJ, which included the Safe Prisons/PREA in Texas training video.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Safe Prisons/PREA Operations Manual 03.01: Offender Assessment Screening (07/2021)
- Agency Response to PAQ

Interviews:

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager) who performs screening for risk of victimization and abusiveness
- Classification staff
- Incident Review Team
- Random inmates
- Targeted inmates

Site Review Observations:

- Inmate files (Inmate Screening Records)
- Intake screening process
- Safe Prisons/PREA Automated Network System (SPPANS) Assessment
- Informal interviews with staff

Findings (by provision):

115.41(a) Provision 115.41(a) states, “All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.”

TDCJ Safe Prisons/PREA Plan (p. 16) and TDCJ Safe Prisons/PREA Operations Manual 3.01: Offender Assessment Screening (p. 1) state all offenders shall be assessed during intake, and if transferred to another unit for permanent assignment, to determine the risk of being sexually abused by or sexually abusive toward other offenders. The auditor provided the TDCJ Offender Intake Processing Psychological Screening Interview which is the method for ensuring the assessment process is completed according to this provision. In addition, the auditor was provided Safe Prisons/PREA Automated Network System (SPPANS) Assessments User Guide which details to staff how the TDCJ management system is used to perform these assessments.

The auditor reviewed files of randomly selected inmates onsite with multiple lengths of stay and confirmed an intake screening had been completed as required by this provision. The auditor witnessed an intake screening of several inmates during the onsite audit and confirmed the facility’s intake screening takes place as specified in agency policy and as required by this provision.

The auditor’s interview with the designated PREA Compliance Manager verified compliance with this provision. The auditor interviewed random and targeted inmates. Most inmates confirmed they had been assessed upon intake into the facility and of those that could not recall, the auditor confirmed their assessments had been completed by reviewing their screening documentation as required.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.41(b) Provision 115.41(b) states, “Intake screening shall ordinarily take place within 72 hours of arrival at the facility.”

TDCJ Safe Prisons/PREA Plan (p. 16) and TDCJ Safe Prisons/PREA Operations Manual 3.01: Offender Assessment Screening (p. 1) state the assessment of risk is completed within 24 hours of arrival at the unit.

In the PAQ, the facility reported 5361 inmates had been admitted to the facility whose length of stay was more than 72 hours, and 100 percent of the inmate population has been assessed as required by this provision.

The auditor randomly selected files from the list of inmates interviewed and verified the risk screening had taken place within
The auditor witnessed the intake screening of several inmates who had arrived at the facility the day before and the day of the assessment taking place.

The auditor interviewed the facility’s designated PREA Compliance Manager who confirmed they perform the screening usually on the same day the inmate arrives at the facility, but always within 72 hours as required by this provision. The auditor’s interviews with inmates also gave evidence as most inmates recalled the screening happening the day they had arrived to the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.41(c) Provision 115.41(c) states, “Such assessments shall be conducted using an objective screening instrument.”

TDCJ Safe Prisons/PREA Plan (p. 16) states the screening assessment used will be objective. The agency provided the auditor with an example of the screening assessment. The assessment asks open-ended questions concerning the inmate’s welfare, physically and mentally. For each question, there are several follow-up questions regarding specifics of any issues reported by the inmate with areas for staff to fill-in, as necessary. There is a general comments section on the first page for staff to use to provide further detail. The Safe Prisons/PREA Automated Network System (SPPANS) Assessments User Guide explains how the information from the screening assessment is used to assist in making program, housing, and work assignments for the inmate.

The auditor witnessed intake screening assessments given by the facility’s designated PREA Compliance Manager. The screening instrument was utilized as intended by this provision and specified in agency policy.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.41(d) Provision 115.41(d) states, “The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate’s criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate’s own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.”

TDCJ Safe Prisons/PREA Plan (p. 16) states the assessment will consider, at a minimum, each of the requirements of this provision. The Safe Prisons/PREA Automated Network System (SPPANS) Assessment lists:

- Inmate’s age, height, and weight (2-3)
- Directs intake staff to review the inmate’s file for prior incarcerations (4)
- If the inmate’s criminal history is exclusively non-violent (5)
- If the file shows evidence that the inmate has history of prior institutional violence or sexual abuse (6)
- If the file shows evidence the offender has history of prior institutional sexual victimization (8)

The assessment then asks the staff to interview the inmate asking if the inmate has:

-Ever experienced sexual victimization (8)
-Engaged in various forms (different forms listed) of sexual abuse (6)
-If the inmate has any mental, physical, or developmental disabilities (1)
-If the inmate feels at risk for sexual abuse, sexual harassment, or other forms of victimization (9)
-How the inmate identifies regarding sexual orientation (7)
-If the inmate is transgender or intersex and whether the inmate is perceived to be such by the intake screening staff (7)

The auditor was informed by the agency and facility that TDCJ does not detain individuals solely for civil immigration purposes, but TDCJ does make available foreign consulate general addresses for all foreign nationals (10).

The auditor witnessed several risk screening assessments performed during the onsite audit and confirmed each screening required staff to ask each question as laid out in the SPPANS assessment and this practice was in place at the facility.

The facility’s designated PREA Compliance Manager performs the risk screening assessments for the facility and confirmed they are required to ask each question from the assessment as detailed above and in policy. The auditor asked inmates in interviews if questions specific to this provision were asked to them and most could recall these questions being requested. Of those that could not recall, the auditor confirmed their screenings were performed as required by reviewing those inmates’ documented assessments.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.41(e)** Provision 115.41(e) states, “The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.”

TDCJ Safe Prisons/PREA Plan (p. 17) states the assessment will consider prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse, as known to TDCJ, in assessing offenders for risk of being sexually abusive. The Safe Prisons/PREA Automated Network System (SPPANS) Assessment directs intake staff to review an inmates file for prior incarcerations for evidence that the inmate has history of prior institutional violence or sexual abuse. The assessment then asks staff to interview the inmate asking if the inmate has ever engaged in various forms of sexual abuse, specifically if the inmate has forced another inmate by violence, threats or promises to provide protection in exchange for sexual acts or has been disciplined in any other institution for sexual abuse or sexual harassment of another inmate.

The facility’s designated PREA Compliance Manager confirmed questions specific to sexual abuse and violent offenses are considered by asking the inmates about these items specifically and by reviewing the inmates’ criminal and incarceration histories. The auditor informally interviewed the classifications staff at the facility who verified these factors are used when assessing an inmate for appropriate assignments within the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.41(f)** Provision 115.41(f) states, “Within a set time period, not to exceed 30 days from the inmate’s arrival at the facility, the facility will reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.”

The auditor was provided the TDCJ Safe Prisons/PREA Operations Manual 3.01: Offender Assessment Screening (p. 8) onsite, which states within 15-30 days of arrival at the facility, the offender will be interviewed and reassessed for potential risk of victimization or abusiveness. Staff will review housing/job history, disciplinary records, institutional adjustment records, custody assignment history, grievances, and mental health referrals in addition to the interview.

In the PAQ, the facility reported 2907 reassessments were completed on inmates in the past 12 months in the Safe Prisons/PREA Automated Network System (SPPANS) system and 1198 assessments had been completed through a paper system (using the same assessment questions), which totaled 100 percent. The auditor requested evidence of reassessments from the designated PREA Compliance Manager, who provided Safe Prisons/PREA Automated Network System (SPPANS) records and paper assessments for review. All reviewed had a reassessment within 30 days, as required.

The auditor learned SPPANS alerts staff when an inmate has been in the facility’s custody for at least 14 days, and the inmates are required to be reassessed at that time. The auditor also learned that the facility’s regional PREA officer has access to the system and if an inmate were getting too close to the 30-day in custody mark without a reassessment being completed, the regional office would alert the facility leadership to ensure an assessment is completed within the allotted 30-day requirement.

The facility’s designated PREA Compliance Manager informed the auditor they reassess inmates as SPPANS alerts them, usually after 14 days of arriving at the facility. The auditor interviewed random and targeted inmates; most confirmed they had been reassessed within 2-4 weeks of arrival at the facility. Of those who could not recall they had been reassessed; the auditor confirmed their reassessment through reviewing their SPPANS documentation with the PCM.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.41(g)** Provision 115.41(g) states, “An inmate’s risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness.”

TDCJ Safe Prisons/PREA Plan (p. 17) states an inmate will be reassessed when warranted, as required by this provision.

The facility informed the auditor in the PAQ that inmates would be reassessed when warranted as required by this provision. The auditor reviewed the facility’s PREA incidents of sexual abuse. Of the incidents that were substantiated or unsubstantiated incidents of sexual abuse in which an inmate would need to be reassessed per this provision, the inmates were reassessed in a classifications committee process as part of the facility’s procedures for reviewing the incident.
The auditor interviewed the facility’s designated PREA Compliance Manager, classification staff and facility leadership and investigators who confirmed after every PREA incident of sexual abuse, the inmates involved in the matter are reassessed, as necessary, to ensure their safety. Facility staff who serve on the PREA Incident Review Team committees also verified these reassessments occur during their reviews. The auditor interviewed inmates who had been alleged victims in sexual abuse at the facility and all confirmed they had been reassessed by the committee who had reviewed their PREA incident.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.41(h) Provision 115.41(h) states, “Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.”

TDCJ Safe Prisons/PREA Plan (p. 18) states offenders will not be disciplined for refusing to answer the assessment/reassessment questions or for not disclosing complete information in response to the questions.

The facility’s designated PREA Compliance Manager confirmed inmates who refuse to answer the assessment or reassessment questions are not disciplined for not responding to the questions.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.41(i) Provision 115.41(i) states, “The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates.”

TDCJ Safe Prisons/PREA Plan (p. 19-20) states staff shall use appropriate controls to disseminate responses to questions asked pursuant to this plan within the units, ensuring that sensitive information is not exploited to the detriment of any offender by staff or other offenders. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary. TDCJ Safe Prisons/PREA Operations Manual 3.01: Offender Assessment Screening (p. 3) and the TDCJ Safe Prisons/PREA Plan (p. 19) state the facility shall implement appropriate controls on the dissemination of the information received in these assessments to ensure it is not exploited to the detriment of any offender by staff or other offenders.

The auditor reviewed the access abilities of different levels of staff to the Safe Prisons/PREA Automated Network System (SPPANS) and confirmed the assessment information is protected based on the level of authorization the staff has to the system. The auditor also confirmed that inmate files were kept under lock and key in the Safe Prison/PREA office and/or classification’s office. The Classification’s staff also confirmed only authorized staff are allowed access to these files.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ CID: Classification Plan (04/2018)
- TDCJ Safe Prisons/PREA Operations Manual 03.01: Offender Assessment Screening (07/2021)
- Agency Response to PAQ

Interviews:

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager) who performs screening for risk of victimization and abusiveness
- Classification staff
- Random staff
- Random inmates
- Targeted inmates

Site Review Observations:

- Classification’s files/office
- Housing/shower areas
- PREA files/office
- Strip-search areas
- Informal interviews with staff and inmates

Findings (by provision):

115.42(a) Provision 115.42(a) states, “The agency shall use information from the risk screening required by § 115.41 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.”

TDCJ Safe Prisons/PREA Plan (p. 10) and TDCJ Safe Prisons/PREA Operations Manual 03.01: Offender Assessment Screening (p. 1) state the Unit Classification Committee (UCC) or reviewing authority for those units without a UCC shall review assessments to facilitate offender housing, job placement, education, and program assignments with the goal of keeping offenders with a high risk of sexual victimization separated from those with a high risk of being sexually abusive. The facility confirmed the unit has a UCC. TDCJ CID: Classification Plan (p. 22-26) states offenders shall be assigned housing and job assignments that ensure the safety, security, treatment, and rehabilitative needs of all offenders are met.

The auditor witnessed the classification’s office onsite and viewed the labeling system the team uses in order to appropriately assign inmates and how those inmates are flagged to be kept separate, as necessary.

The auditor informally asked classifications staff how the inmate assignments are made in regard to this provision and staff confirmed the screening assessments and reassessments assist in making these assignments with the goal of keeping inmates who may be victimized or who may be abusive away from one another. The auditor’s interview with the facility’s Warden and designated PREA Compliance Manager also verified the assessments are made with the goal of keeping inmates, staff and the facility safe and they attempt to specifically separate those inmates who are prone to victimization away from those who are prone to perpetrate abuse.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.42(b) Provision 115.42(b) states, “The agency shall make individualized determinations about how to ensure the safety of each inmate.”

TDCJ Safe Prisons/PREA Plan (p. 10) states the UCC shall make individualized determinations regarding how to ensure the safety of each offender. TDCJ CID: Classification Plan (p. 1) states classification strives to achieve the goal that each offender is placed in an institutional setting where the offender receives supervision in work, education, vocational training,
and treatment consistent with the safety needs of the individual offender, the public, the staff, and the total offender population. TDCJ Safe Prisons/PREA Operations Manual 03.01: Offender Assessment Screening (p. 1) states in making housing assignments, consideration shall be given to characteristics such as age, height, weight, violent/passive tendencies, criminal sophistication, homosexual (active/passive) tendencies, offender enemies, Security Threat Group (STG) status and current institutional adjustment.

The auditor interviewed the Warden, designated PREA Compliance Manager, and informally interviewed the facility’s classification staff about how housing determinations are made. The staff were able to confirm the assessment screening information collected is used to determine the safest assignment for each inmate.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.42(c) Provision 115.42(c) states, “In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether the placement would present management or security problems.”

TDCJ Safe Prisons/PREA Plan (p. 10) states when deciding whether to assign a transgender or intersex inmate to a unit for male or female inmates, and when making other housing and programming assignments, consideration shall be made on a case-by-case basis with regard to the health and safety of the offender and potential management or security problems. Housing determinations shall not be made solely on the basis of LGBTI status.

The auditor interviewed the Warden and designated PREA Compliance Manager who confirmed transgender inmates are assigned on a case-by-case basis, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.42(d) Provision 115.42(d) states, “Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.”

TDCJ Safe Prisons/PREA Plan (p. 10) states placement and programming assignments for each transgender or intersex offender shall be reassessed semiannually to review any threats to safety experienced by the offender.

The auditor interviewed transgender inmates who confirmed they had been reassessed as required by this provision. The inmates informed the auditor they felt safe and secure in their housing, programs and work assignments.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.42(e) Provision 115.42(e) states, “A transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration.”

TDCJ Safe Prisons/PREA Plan (p. 10) states the transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration.

The auditor was informed by the facility that the inmate’s own views to his or her safety would be discussed with the inmate during the UCC.

The auditor interviewed the Warden, and designated PREA Compliance Manager regarding the assignments by the UCC. All staff interviewed confirmed the inmate’s own views to safety would be asked and addressed in-person at the UCC meeting, as required. The auditor interviewed transgender inmates who confirmed they had been specifically asked about their housing preferences and views on their safety during their classifications committee. These inmates confirmed to the auditor they feel safest in their current assignments at the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.42(f) Provision 115.42(f) states, “Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.”

TDCJ Safe Prisons/PREA Plan (p. 9) states offenders identified as transgender or intersex shall be given the opportunity to shower separately from other offenders in accordance with Correctional Managed Health Care (CMHC) policies.

The auditor was informed that inmates who were transgender or intersex would be allowed to shower separately from other inmates as the facility has only single-person showers with curtains for all inmates to use. The auditor witnessed these
showers onsite and confirmed they have the intended privacy for transgender inmates, and all other inmates.

The auditor interviewed the Warden and designated PREA Compliance Manager who confirmed the facility has only single-person showers with curtains that allow all inmates, including transgender inmates, the ability to shower separately from other inmates. The staff also informed the auditor all transgender inmates are strip-searched separately from other inmates to ensure their privacy. Random staff and transgender inmates confirmed this procedure is performed for strip-searches of transgender inmates at all times.

The facility has ensured that transgender and intersex inmates are given the opportunity to shower separately from other inmates. In addition to this practice, the facility has understood the intent of this standard is to ensure this population is given privacy in all aspects of custody to include the unclothed-search procedures. The facility has gone through physical changes with search privacy curtains in addition to staff trainings concerning privacy for transgender and intersex inmates during non-clothed searches. These efforts show the agency’s goal is to keep these populations safe by giving privacy needed to keep gender status unknown to other inmates.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility exceeds standards in this provision.

115.42(g) Provision 115.42(g) states, “The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.”

TDCJ Safe Prisons/PREA Plan (p. 10) states LGBTI offenders shall not be placed in dedicated facilities, units, or wings solely based on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting these offenders.

The auditor interviewed the designated PREA Compliance Manager who confirmed the facility has a high number of inmates who are lesbian or bisexual and there is no dedicated facility, unit or wing for these inmates based on their sexual orientation or transgender/intersex status. The auditor interviewed several inmates who identified as lesbian, bisexual or transgender who confirmed their housing is not based on their gender identification and/or sexual orientation.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
### 115.43 Protective Custody

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Safe Prisons/PREA Program Offender Protection Investigation Form (07/2014)
- TDCJ Administrative Directive AD-04.63 (rev. 5): Transient Status Offenders (06/30/2014)
- TDCJ Protective Safekeeping Plan (07/2015)
- TDCJ Restrictive Housing Log (08/2019)
- TDCJ Restrictive Housing Plan (August 2019)
- Agency Response to PAQ

**Interviews:**

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Staff who supervise inmates in segregated housing
- Inmates in segregation (not for sexual victimization risk)

**Site Review Observations:**

- Inmate files (segregation assignment/review)
- Segregation housing rosters

**Findings (by provision):**

#### 115.43(a)

Provision 115.43(a) states, “Inmates at high risk for sexual victimization shall not be placed 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 a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.”

TDCJ Safe Prisons/PREA Plan (p. 18) states offenders at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all available alternatives has been made, and it is determined there is no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregation while completing the assessment for no longer than 24 hours.

The facility reported in the past 12 months there had been no inmates held in involuntary segregated housing for risk of sexual victimization.

The auditor reviewed randomly selected inmate files from random and targeted inmates, as well as inmate files from the facility’s PREA investigations. Of the inmates who may have a propensity of a risk for sexual victimization (gay, bisexual, first time incarcerated, etc.) the auditor found no inmates had been moved to involuntary segregated housing for their protection for any period.

The auditor interviewed the facility’s Warden who confirmed no inmates had been held in involuntary segregation housing for risk of sexual victimization since they had taken office at the facility and the previous Warden had not had inmates housed in segregation for this reason, either. The facility’s designated PREA Compliance Manager confirmed there has been no incidents of this at the facility, but that if it was necessary, the procedure outlined by agency policy would be followed, which is compliant with this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

#### 115.43(b)

Provision 115.43(b) states, “Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.”

TDCJ Safe Prisons/PREA Plan (p. 18-19) states in protective safekeeping for this purpose, inmates shall have access to

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programs, privileges, education, and work opportunities to the extent possible and should these items be restricted, the unit shall document what has been limited and how long and the reasons for such as required by this provision. The facility provided the auditor with the TDCJ Restrictive Housing Log as an example of the documentation required by this provision, should the facility need to place an inmate in segregated housing for risk of sexual victimization. The auditor interviewed staff who worked the segregation unit at the facility who were unaware of any inmates being involuntary segregated for sexual victimization risk, however the staff confirmed if any were placed in this housing, they would follow agency policy and procedure regarding the allowance of these inmates to go to programs, education, work opportunities or have other privileges, as specified by facility leadership. The auditor interviewed inmates in segregation for other reasons besides risk of sexual victimization but none had known of the privileges allowed to inmates in segregation for the reasons specified in this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.43(c) Provision 115.43(c) states, “The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.”

TDCJ Safe Prisons/PREA Plan (p. 18) states offenders shall be assigned to protective safekeeping only until an alternative means of separation from likely abusers is arranged, for no longer than 30 days.

The facility reported in the PAQ that is had no inmates placed in involuntary segregation housing for risk of sexual victimization.

The auditor reviewed inmate housing rosters onsite and confirmed the inmates in the segregation areas (for reasons other than risk of sexual victimization) had only been in the housing areas for a few days at a time, with many inmates being removed or added to the roster over the course of days the auditor had been onsite.

The facility’s designated PREA Compliance Manager confirmed that inmates are rarely kept in segregation housing for more than 7 days and never longer than 30 days. The PCM also confirmed no inmates had been kept in involuntary segregation for any length of time due to risk of sexual victimization. The auditor interviewed staff who work the facility’s segregation areas, and they all gave evidence that all inmates in segregation housing stay in that type of housing for a few days to a week. The auditor interviewed inmates in segregation for other reasons and they confirmed that most inmates stay in segregation for a few days to a week.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.43(d) Provision 115.43(d) states, “If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility’s concern for the inmate’s safety; and (2) The reason why no alternative means of separation can be arranged.”

TDCJ Safe Prisons/PREA Plan (p. 18) states if a protective safekeeping housing assignment is made, the unit shall clearly document the basis of the concern for the offender’s safety and the reason why no alternative means of separation can be arranged.

The auditor interviewed the facility’s Warden regarding this provision who confirmed if any inmates are kept in protective safekeeping housing for this reason, agency policy would be followed as specified in the TDCJ Safe Prisons/PREA Plan.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.43(e) Provision 115.43(e) states, “Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.”

TDCJ Safe Prisons/PREA Plan (p. 19) states every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the offender from general population.

The staff assigned to segregation housing confirmed the facility leadership reviews the segregation housing on a weekly basis. The auditor’s interviews with inmates also supported this timeline for inmates in segregation for other reasons than risk of sexual victimization.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:
The auditor recommends no corrective action.
Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Board Policy BP-03.91 (rev. 5): Uniform Inmate Correspondence Rules (06/25/2021)
- TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (03/01/2017)
- TDCJ General Information Guide for Families of Offenders (04/2016)
- TDCJ Offender Orientation Handbook (02/2017)
- TDCJ Safe Prisons/PREA Operations Manual 2.03: Safe Prisons/PREA Program Postings and Brochures (02/2020)
- TDCJ Safe Prisons/PREA Program Attachment C: Achieving a Safe Environment for All Through Positive Change by All (Offender Brochure)
- TDCJ Statement of Fact 115.51 (03/28/22)
- Texas Board of Criminal Justice PREA Ombudsman Office Brochure (05/2019)
- Agency Response to PAQ

Interviews:

- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Contract staff
- Mailroom staff
- Random staff
- Staff who have accepted reports from inmates
- Volunteers
- Random inmates

Site Review Observations:

- PREA case files
- Informal interviews with staff and inmates

Findings (by provision):

115.51(a) Provision 115.51(a) states, “The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.”

TDCJ Safe Prisons/PREA Plan (p. 20) states offenders shall be provided multiple internal methods to privately report sexual abuse, sexual harassment, and other acts of aggression including retaliation by other offenders or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents.

The document states offenders may report allegations directly to the major, Office of Inspector General or the PREA Ombudsman. TDCJ Executive Directive ED-02.10 (rev. 2): Prison Rape Elimination Act Complaints and Inquires (p. 4) states a posting providing information about PREA and how to contact the PREA Ombudsman shall be posted at each correctional facility. The posting is attached in both English and Spanish.

TDCJ Safe Prisons/PREA Operations Manual 2.03: Safe Prisons/PREA Program Postings and Brochures (p. 1-2) states information about PREA and reporting shall be provided to offenders through posters, handbooks or other written material in the forms of Zero-Tolerance Policy posters, Sexual Abuse, Sexual Harassment and Extortion Awareness Posters, and the Sexual Abuse Awareness Brochure. The auditor was provided a copy of the TDCJ PREA Brochure and the TDCJ Offender Orientation Handbook. The TDCJ Offender Orientation Handbook (p. 28) lists reporting mechanisms include telling any staff member, contacting the PREA Ombudsman in writing, or having family or friends report to the PREA Ombudsman on their behalf. The TDCJ PREA Brochure states offenders are encouraged to immediately report allegations to staff, the PREA Ombudsman’s Office, the Office of Inspector General, through a grievance, or by having family of friends contact the Ombudsman’s Office or OIG. The brochure then gives addresses and telephone numbers to the PREA Ombudsman and OIG.

The auditor observed the agency’s PREA postings in every area of the facility to include but not limited to inmate housing areas, education and programs, kitchen, commissary, laundry, intake, maintenance, administration offices and medical
areas. The auditor observed several different types of postings that listed the zero-tolerance policy and/or reporting mechanisms for inmates and staff. All posted information was consistent with the methods listed in the TDCJ Safe Prisons/PREA Operations Manual.

The auditor interviewed staff regarding their knowledge of the reporting mechanisms for PREA. All staff were aware of inmates’ ability to report directly to staff members and through writing on request/grievance forms. Most staff were also aware of the ability to make reports through the PREA Ombudsman and OIG. All inmates were aware reports could be made privately through Chain of Command staff and most inmates stated they felt comfortable reporting through all staff at the facility. Inmates also felt their reports would be kept private if requested. Most inmates were aware that private reports could be made through “I-60” request/grievance forms and many inmates were also knowledgeable of their ability to use the PREA Ombudsman’s office to make reports. Of the inmates who were not sure on private reporting methods, the auditor confirmed these inmates had received handbooks/PREA education material that explained this information to them. These inmates also were aware of the postings throughout the facility but admitted they had not needed to look at one but knew where they were if needed in the future.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.51(b) Provision 115.51(b) states, “The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.”

TDCJ Safe Prisons/PREA Plan (p. 20) states offenders may report allegations directly to the Office of Inspector General or PREA Ombudsman. The Texas Board of Criminal Justice PREA Ombudsman Office Brochure states the PREA Ombudsman was established by the Texas Board of Criminal Justice and serves as an external, independent office to monitor and conduct administrative investigations of allegations of sexual abuse and sexual harassment. The TDCJ Offender Orientation Handbook (p. 26), TDCJ Safe Prisons/PREA Program Attachment C: Achieving a Safe Environment for All Through Positive Change by All (Offender Brochure) and Zero-Tolerance Policy posters state offenders may contact the PREA Ombudsman anonymously by treating the correspondence as “special mail.” Special Correspondence, according to the TDCJ Board Policy BP-03.91 (rev. 5): Uniform Inmate Correspondence Rules (p. 3), is any mail sent to the Texas Board of Criminal Justice, the executive director, the deputy executive director, any division directors, deputy directors, PREA Ombudsman or wardens of the TDCJ. The document further states letters to these entities shall not be opened and sent directly to the intended correspondent.

The auditor was informed by the facility that TDCJ does not detain individuals solely for civil immigration purposes, but TDCJ does make available foreign consulate general addresses for all foreign nationals.

The auditor witnessed postings on the facility’s walls and bulletin boards as well as inmate handbooks and brochures that listed how the PREA Ombudsman and OIG may be contacted, including anonymous contact.

The auditor interviewed the facility’s mailroom staff who confirmed any inmate mailings to the PREA Ombudsman’s office or OIG would be handled as privileged mail and outgoing correspondence would not be read. The mailroom staff also confirmed if an inmate were to write these entities anonymously, the mail would still be handled and distributed according to policy. The mailroom staff verified incoming mail received from these entities would not be read and would only be opened as legal mail is opened: not read but skimmed only for contraband in front of the inmate. The auditor interviewed random staff and inmates; most were aware of the processes for anonymous contact to the outside entities. Of those who were not aware, the auditor verified these staff and inmates had access to the documents that would provide how an outside entity could be contacted, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.51(c) Provision 115.51(c) states, “Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.”

TDCJ Safe Prisons/PREA Plan (p. 21) states staff shall accept reports made verbally, in writing, anonymously and from third parties and shall promptly document any verbal reports. TDCJ Offender Orientation Handbook (p. 28) informs inmates they should report incidents to any staff member immediately and all staff have been trained to receive such reports and maintain confidentiality. The Texas Board of Criminal Justice PREA Ombudsman Office Brochure states any staff member knowledgeable of sexual abuse or sexual harassment of an offender must immediately report the allegation to unit administration.

The facility informed the auditor that staff are required to immediately report any verbal reports so that investigations can
The auditor reviewed PREA reports provided in the pre-onsite audit phase that had been made verbally and in writing, and anonymously through facility staff and verified these reports had been documented as required by this provision.

The auditor interviewed the facility’s designated PREA Compliance Manager. The designated PCM verified all staff reports received are documented as required by agency policy and this provision. The auditor interviewed random staff and staff who had accepted inmate reports. All staff confirmed they are required to document any reports through witness statements (as seen by the auditor in the PREA case files).

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.51(d)** Provision 115.51(d) states, “The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.”

TDCJ Safe Prisons/PREA Plan (p. 21) state a method shall be provided for staff to privately report sexual abuse and sexual harassment of offenders. TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (p. 5) states an employee or other individual may privately report alleged sexual misconduct of offenders directly to the PREA ombudsman, an OIG investigator, or the OIG Records Management Office without reporting such misconduct through the chain-of-command.

The auditor interviewed random staff and most were aware that private reports could be made through their Chain of Command, PREA Ombudsman’s and OIG. Of those who were not sure, they assumed reports could be made through their Chain of Command and when asked, were able to verify their knowledge of the OIG and PREA Ombudsman’s Office for this procedure. However, all staff verified they would feel comfortable in making these reports through their Chain of Command at the facility. The auditor also interviewed contract staff and volunteers who were also comfortable and knowledgeable of their ability to make private reports through the facility’s leadership and most were also aware of the OIG and PREA Ombudsman’s Offices ability to take staff reports.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Board Policy BP-03.77 (rev. 9): Offender Grievances (12/10/2015)
- TDCJ Grievance Process Training (05/27/22)
- TDCJ Offender Grievance Operations Manual 1.04 PREA Allegations (07/2016)
- TDCJ Offender Grievance Operations Manual Appendix U, Offender Third Party Investigation Form
- TDCJ Offender Orientation Handbook (02/2017)
- Agency Response to PAQ

Interviews:

- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Facility grievance staff
- Facility investigative staff
- Inmate disciplinary staff
- Targeted inmates

Site Review Observations:

- PREA case files
- Grievance responses to PREA allegations
- Informal interviews with staff and inmates

Findings (by provision):

115.52(a) Provision 115.52(a) states, “An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.”

In the PAQ, the agency advised the auditor that it has an administrative procedure for dealing with inmate grievances regarding sexual abuse. This provision is applicable to this facility’s audit. TDCJ Safe Prisons/PREA Plan (p. 22) states an offender who alleges sexual abuse may submit a grievance [in accordance with the TDCJ Offender Grievance Operations Manual].

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is not exempt from this standard.

115.52(b) Provision 115.52(b) states, “(1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency’s ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.”

TDCJ Safe Prisons/PREA Plan (p. 22) states a time limit shall not be imposed when an offender may submit a grievance regarding an allegation of sexual abuse. The plan also states, in accordance with the TDCJ Offender Grievance Operations Manual, an offender who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and a grievance of this nature shall not be referred to a staff member who is the subject of the complaint. The auditor reviewed the TDCJ Offender Orientation Handbook (p. 74) which explains the process of filing an offender grievance and this process is used in all manners except for sexual abuse and PREA related cases. The handbook also reads (p. 28) inmates may make reports to staff verbally or in writing or may write the PREA Ombudsman and then it lists an address for this contact.

The auditor was given 9 grievances that were related to sexual abuse or sexual harassment allegations that had been reported through the facility’s grievance process. All cases showed no evidence that a time limit between the alleged act and submission of the grievance had been applied. The auditor reviewed the cases and confirmed the accusing inmates had not been required to use an informal grievance process in any of the alleged incidents.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.52(c) Provision 115.52(c) states, “The agency shall ensure that—(1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint.”

TDCJ Safe Prisons/PREA Plan (p. 22) states in accordance with the TDCJ Offender Grievance Operations Manual, an offender who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and a grievance of this nature shall not be referred to a staff member who is the subject of the complaint. The agency provided the auditor with TDCJ Offender Grievance Operations Manual, Offender Third Party Investigation Form which states offender grievances regarding an allegation of sexual abuse shall be handled according to the TDCJ Safe Prisons/PREA Plan.

For the allegations on staff that were reported through the facility’s grievance process, the cases showed evidence the investigations were referred to grievance and investigative staff and had not been referred back to the alleged staff.

The auditor interviewed the facility’s grievance staff regarding the process of grievances concerning staff sexual abuse allegations. The grievance staff confirmed the complaints are forwarded immediately to facility leadership and investigators for PREA investigation and are never given to the staff member who is the subject of the compliant for resolution.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.52(d) Provision 115.52(d) states, “(1) The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period shall not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.”

TDCJ Safe Prisons/PREA Plan (p. 22) states a final decision [regarding sexual abuse allegations made through the grievance system] shall be made on the merits of any portion of a grievance alleging sexual abuse within 90-days of the initial filing of the grievance. The plan states the computation of the 90-day time period shall not include time used by offenders for preparing an administrative appeal and if the 90-day time period is insufficient to make an appropriate decision, an extension of up to 70 days may be granted and when this occurs, the offender shall be notified in writing of the extension and date by which the decision will be made. The plan also states at any level of the process, including the final level, if the offender does not receive a response within the allotted time, including the extension, the offender may consider the absence of the response to be a denial at that level.

The facility reported in the PAQ there had been 9 grievances filed in the past 12 months that alleged sexual abuse and all reports had reached a final decision within 90 days of being filed. The auditor reviewed these files and confirmed all had received final decisions within 3-20 days of being filed.

The auditor interviewed the facility’s grievance staff who confirmed any grievance alleging sexual abuse or sexual harassment are treated as an emergency grievance and immediately forwarded to facility leadership and PREA staff for investigation. The auditor verified with facility staff the forwarding timeline and final decision would be completed within the 90-day time limit as stipulated in this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.52(e) Provision 115.52(e) states, “(1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim
agree to have the request filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate’s decision.”

TDCJ Safe Prisons/PREA Plan (p. 23) states family members or other individuals may report verbally or in writing to the unit administration any time they have knowledge of, or suspect an offender has been sexually abused, sexually harassed, or requires protection. The plan states staff shall accept reports regarding this provision to include a grievance submitted through the grievance process, anonymously and from third parties. The auditor was provided a copy of TDCJ Offender Grievance Operations Manual Appendix U, Offender Third Party Investigation Form that includes an area for the inmate to mark YES or NO, agreeing to the request on their behalf and if yes, instructions on how to write and submit the grievance, which will begin immediately. There is an area for the inmate and two staff witnesses to sign and date the form.

The auditor reviewed the PREA allegations that had been made through the grievance system and 1 case had been completed by a third-party inmate at the facility. This case had been investigated by the facility however the facility had not utilized the TDCJ Offender Grievance Operations Manual Appendix U, Offender Third Party Investigation Form as required by agency policy. This was brought to the attention of the facility leadership and training on this form and its use was provided to facility staff on June 6, 2022. However, for compliance with this provision, the third-party allegation was permitted and fully investigated as intended by this standard regardless of the incorporation of the designated agency form.

The auditor interviewed the facility’s grievance staff who verified all reports, to include third-party reports, are permitted for filing grievance allegations of sexual abuse or sexual harassment and that all such grievance cases are forwarded to facility leadership and PREA staff for investigation.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.52(f) Provision 115.52(f) states, “(1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.”

TDCJ Safe Prisons/PREA Plan (p. 22) states when an emergency grievance is received, any portion that alleges substantial risk of imminent sexual abuse shall be forwarded to a level of review for immediate corrective action. The plan states in these cases, an initial response shall be provided within 48 hours of receipt, and a final agency decision rendered within 5 calendar days. The initial response and final decision shall document whether the offender is in substantial risk of imminent sexual abuse and the action taken.

The facility reported in the PAQ there had been no emergency grievances alleging an inmate was at substantial risk of imminent sexual abuse in the past 12 months. The auditor learned all grievances alleging sexual abuse or sexual harassment are labeled as ‘Emergency Grievances’ in the facility’s system however, this terminology only allows the grievance response to be expedited and doesn’t necessarily equate to an emergency grievance regarding imminent sexual abuse according to this provision. The auditor reviewed the PREA allegations that had been made through the grievance system and none had met the definition of an emergency grievance for this provision.

The auditor interviewed the facility’s grievance staff who confirmed the labeling of grievances related to PREA as ‘emergency grievances’ was to expedite the timeline of the grievances review to ensure all such grievances, regardless of the risk of imminent sexual abuse, are given an immediate initial response and final decision as required by this provision. The staff confirmed they have not known of any grievances in which sexual abuse was imminent as intended by this provision but the staff verified if such complaint was filed, they would follow agency policy.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.52(g) Provision 115.52(g) states, “The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.”

TDCJ Safe Prisons/PREA Plan (p. 22) states an offender may be disciplined for filing a grievance related to alleged sexual abuse only where the investigation determines the offender filed the grievance in bad faith.

The agency informed the auditor the facility may discipline an inmate for filing a grievance related to sexual abuse only when the investigation determines it was filed in bad faith. The facility reported no grievances were found to have been filed in bad faith.
The auditor interviewed the facility’s disciplinary supervisor and other facility PREA investigators regarding this provision. All confirmed disciplinary measures would be taken against inmates when it was found that bad-faith grievances were filed.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Safe Prisons/PREA Program Attachment C: Achieving a Safe Environment for All Through Positive Change by All (Offender Brochure)
- TDCJ Solicitation Letters between TDCJ units and Various Community Rape Crisis Organizations (2018-2020)
- Texas Association Against Sexual Assault (TAASA) Service Directory (10/23/2018)
- TDCJ Board Policy BP-03.91 (rev. 5): Uniform Inmate Correspondence Rules (06/25/2021)
- TDCJ Offender Orientation Handbook (02/2017)
- TDCJ Statement of Fact 115.53 (10/18/2021)
- Agency Response to PAQ

Interviews:

- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Random inmates
- Targeted inmates

Site Review Observations:

- PREA case files

Findings (by provision):

115.53(a) Provision 115.53(a) states, “The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.”

TDCJ Safe Prisons/PREA Plan (p. 13) 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 or rape crisis organizations. The unit shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible. The auditor was provided the TDCJ Safe Prisons/PREA Program Attachment C: Achieving a Safe Environment for All Through Positive Change by All (Offender Brochure) which informs inmates that mental health staff are available for crisis care and for additional emotional support. The facility provided the auditor with the Texas Association Against Sexual Assault (TAASA) Service Directory list which is what would be provided to requesting inmates. The list contains names, locations, mailing addresses, hotline numbers, toll-free numbers (where available) for rape crisis centers across Texas. TDCJ Board Policy BP-03.91 (rev. 5): Uniform Inmate Correspondence Rules (p. 3) states special correspondence includes correspondence from a rape crisis center that possesses a memorandum of understanding with the TDCJ to provide emotional support to inmates and inmates may send sealed and uninspect ed letters directly to these entities.

The auditor was informed by the facility that TDCJ does not detain individuals solely for civil immigration purposes, but TDCJ does make available foreign consulate general addresses for all foreign nationals. The auditor was also provided TDCJ Statement of Fact 115.53 stating an attempt has been made between the agency and a rape crisis center, but an agreement has not been finalized between the two at the time of the onsite audit. The facility provided multiple communications showing the attempt to enter into a memorandum of understanding as required by this provision, however, at the time of this audit, the agreement had not been established.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.53(b) Provision 115.53(b) states, “The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.”

TDCJ Safe Prisons/PREA Plan (p. 13) states offenders shall be informed, prior to giving them access, of the extent to which
these communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The TDCJ Safe Prisons/PREA Program Attachment C: Achieving a Safe Environment for All Through Positive Change by All (Offender Brochure) informs inmates all correspondence is subject to monitoring and reports of abuse may be forwarded to authorities in accordance with mandatory reporting laws.

The auditor interviewed random inmates. Most were aware of the facility’s procedure for privileged mail. All inmate files reviewed by the auditor showed the inmates had been given information on these procedures through the TDCJ Offender Orientation Handbook and the TDCJ Safe Prisons/PREA Program brochure: Achieving a Safe Environment for All Through Positive Change by All.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.53(c) Provision 115.53(c) states, “The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.”

The facility informed the auditor in the PAQ a memorandum of understanding between TDCJ and a rape crisis center has been attempted for the Plane/Henley Complex, but the arrangement has not been finalized. The facility provided multiple communications showing the attempt to enter into a memorandum of understanding as required by this provision, however, at the time of the onsite audit phase, the agreement had not been established. The facility provided the auditor with TDCJ Statement of Fact 115.53, signed by TDCJ Ombudsman (p. 1) which explains this circumstance.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
Third-party reporting

<table>
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<tr>
<th>Auditor Overall Determination: Meets Standard</th>
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**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ General Information Guide for Families of Offenders (04/2016)
- TDCJ Offender Orientation Handbook (02/2017)
- Website: https://www.tdcj.texas.gov/tbcj/prea.html
- Agency Response to PAQ

**Interviews:**

Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
Facility investigative staff
Random staff
Random inmates
Targeted inmates

**Site Review Observations:**

PREA case files

Findings (by provision):

**115.54(a)** Provision 115.54(a) states, “The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.”

TDCJ Safe Prisons/PREA Plan (p. 20) states information that an offender may be in need of protection can come from the offender, other offenders, the offender’s family, TDCJ staff or others. The TDCJ Offender Orientation Handbook (p. 25-26) informs inmates they may file allegations of sexual abuse and sexual harassment to any staff member or ask a family member to call the Ombudsman Office immediately. The TDCJ Executive Directive ED-02.10 (rev. 2); Prison Rape Elimination Act Complaints and Inquires (p. 4) states contact, mailing address, and phone number for direct inquiries and complaints to the PREA Ombudsman shall be available on the TDCJ website. The auditor reviewed the TDCJ website during the pre-onsite audit phase and found the information required by this provision: https://www.tdcj.texas.gov/tbcj/prea.html. Finally, the TDCJ General Information Guide for Families of Offenders (p. 35) is provided to the public and states public contacts of offenders are encouraged to immediately report allegations of sexual abuse or sexual harassment on behalf of their offender by contacting the PREA Ombudsman Office and the phone number, mailing address and website are provided.

The auditor reviewed the facility’s PREA investigations and found 8 allegations had been made by third party inmates, staff and/or inmate family/friends on an inmate’s behalf. One of these reports had been made by a third-party family member through the PREA Ombudsman’s Office. Each of these investigations had been fully investigated as required by this provision.

The auditor interviewed random and investigative staff as well as the facility’s designated PREA Compliance Manager. All verified third-party reports are taken seriously and investigated as any other PREA allegation. The auditor also interviewed inmates who had made a third-party report on behalf of another inmate who confirmed their report had been fully investigated, to the best of their knowledge. The auditor confirmed these reports had been investigated when reviewing the facility’s PREA case files.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (03/01/2017)
- Agency Response to PAQ

Interviews:

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Medical staff
- Mental Health staff
- Random staff
- Targeted inmates

Site Review Observations:

PREA case files

Findings (by provision):

115.61(a) Provision 115.61(a) states, “The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.”

TDCJ Safe Prisons/PREA Plan (p. 23) states all staff members shall immediately report, according to TDCJ policy, any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred on a unit, whether or not it is a TDCJ facility; retaliation against offenders or staff who reported an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. TDCJ Executive Directive PD-29: Sexual Misconduct with Offenders (p. 4) states an employee who becomes aware of alleged sexual misconduct shall immediately report such misconduct. The document lists how the reports can be made.

The auditor reviewed the facility’s PREA investigations and found the incidents had been reported and investigated as required by this provision and agency policy.

The auditor interviewed random and specialized staff about their reporting duties and requirements. All staff, including contract staff, were aware of their responsibilities to report allegations as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.61(b) Provision 115.61(b) states, “Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.”

TDCJ Safe Prisons/PREA Plan (p. 23) states staff shall not reveal any information related to a sexual abuse report to anyone other than designated supervisors or officials, and only to the extent necessary to make informed treatment, investigative, security, and management decisions.

The auditor interviewed random staff and all verified PREA investigation information is kept confidential aside from information needed for treatment, investigation, or other security/management needs. The auditor interviewed inmates who had been involved in a PREA investigation as an alleged victim or witness and all informed the auditor they believed the information disclosed was kept private from other inmates and staff, as required.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.61(c) Provision 115.61(c) states, “Unless otherwise precluded by Federal, State, or local law, medical and mental health
practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services.”

TDCJ Safe Prisons/PREA Plan (p. 23) states unless otherwise precluded by federal, state, or local law, and at the initiation of services, medical and mental health practitioners shall be required to report sexual abuse pursuant to Section IV.B.1 of this plan, and to inform offenders of the practitioner’s duty to report, and the limitations of confidentiality.

The auditor reviewed the facilities PREA case files and found no limits of confidentiality needed to be disclosed in the incidents reviewed.

The auditor interviewed medical and mental health staff regarding this provision and all confirmed they receive yearly training on their duties concerning PREA allegations which include detailed information on their limits of confidentiality and the necessity to disclose this to inmates at the initiation of services.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.61(d) Provision 115.61(d) states, “If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.”

The auditor interviewed the unit Warden who confirmed there are no inmates under the age of 18 at the facility. The Warden confirmed any inmates who were considered vulnerable adults that disclosed sexual abuse would be referred to state agencies as required by law.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.61(e) Provision 115.61(e) states, “The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators.”

TDCJ Safe Prisons/PREA Plan (p. 23) states after learning of an allegation, staff are required to report to a security supervisor. The facility informed the auditor the supervisors who receive these reports are required to report the allegation to facility investigators/SPPMO.

The auditor interviewed the Warden and designated PREA Compliance Manager who confirmed staff are required to make reports of any sexual abuse or sexual harassment allegations to supervisors who then notify the facility’s designated investigators, as required by agency policy and this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.62</th>
<th>Agency protection duties</th>
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<tbody>
<tr>
<td><strong>Auditor Overall Determination:</strong> Meets Standard</td>
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<td><strong>Auditor Discussion</strong></td>
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<td><strong>Documents Reviewed:</strong> (Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (02/2019)</td>
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<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<td>Warden</td>
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<td>Random staff</td>
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<td><strong>Site Review Observations:</strong></td>
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<td>PREA case files</td>
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<tr>
<td><strong>Findings (by provision):</strong></td>
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<tr>
<td><strong>115.62(a)</strong> Provision 115.62(a) states, “When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.”</td>
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<tr>
<td>TDCJ Safe Prisons/PREA plan (p. 22) states when any portion of an emergency grievance is received that alleges substantial risk of imminent sexual abuse, it shall be forwarded to a level of review for immediate corrective action.</td>
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<tr>
<td>The facility reported no times in the past 12 months had an inmate been determined to be at substantial risk of imminent sexual abuse. The auditor reviewed the facility’s PREA Investigations and confirmed there had been no report or suspicion of imminent sexual abuse of an inmate based on the allegations made.</td>
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<tr>
<td>The auditor interviewed the facility’s Warden who confirmed staff are trained and required to provide immediate action to protect an inmate when sexual abuse has been alleged to be imminent to an inmate. The auditor interviewed random staff who were unanimous in knowing their requirements to protect an inmate when sexual abuse risk is imminent.</td>
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<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td><strong>Corrective Action:</strong></td>
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<tr>
<td>The auditor recommends no corrective action.</td>
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115.63 Reporting to other confinement facilities

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<tr>
<th>Auditor Overall Determination: Meets Standard</th>
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Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Facility Notices to and from other TDCJ Facilities
- Agency Response to PAQ

Interviews:

- Agency Head Representative
- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)

Site Review Observations:

- PREA case files

Findings (by provision):  

115.63(a) Provision 115.63(a) states, “Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.”

TDCJ Safe Prisons/PREA Plan (p. 24) states after receiving an allegation that an offender was sexually abused while confined at another facility, the individual taking the initial report shall immediately notify the USPPM. The auditor was informed in the PAQ that the warden or designee of the facility must notify the warden or designee of the facility that the alleged abuse occurred and initiate an investigation between both facilities.

The facility reported it had no allegations that an inmate was sexually abuse while confined at another facility. The auditor confirmed this when reviewing the facility’s PREA case files.

The facility’s Warden confirmed in interview with the auditor that all allegations from other facilities are fully investigated and handled through notifications from one Warden to another. The auditor interviewed the facility’s designated PREA Compliance Manager who stated that all allegations, regardless of the confinement facility, were fully investigated to the best of their abilities and that should the Plane/Henley Complex facility receive an allegation that occurred at another facility, the investigation would be handled according to agency policy and this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.63(b) Provision 115.63(b) states, “Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.”

TDCJ Safe Prisons/PREA Plan (p. 25) states SPPMO shall provide the notification as soon as possible, but no later than 72 hours after receiving the allegation.

The auditor reviewed the investigation files and found no instances in which the Plane/Henley Complex had received an allegation that an inmate had been sexually abused while confined at another facility.

The auditor was provided a telephone interview with an Agency Head Representative for TDCJ who states reports received from one facility to another, or from another facility are referred to OIG and PREA Ombudsman and investigated in the same manner as if an inmate were to make an internal report. The auditor’s interview with the Warden confirmed all allegations from one facility to another are handled through warden-to-warden communications, as soon as the allegation is made known to staff. The auditor also interviewed the facility’s designated PREA Compliance Manager who verified this process.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.63(c) Provision 115.63(c) states, “The agency shall document that it has provided such notification.”

TDCJ Safe Prisons/PREA Plan (p. 25) states the SPPMO shall document the notification. TDCJ Safe Prisons/PREA
Operations Manual 04.01: Reporting Allegations of Sexual Abuse to Other Confinement Agencies (p. 2) states the SPPMO or designee shall promptly review the information received and generate a formal letter for notification to the appropriate head of the facility or office of the agency. The letter shall be faxed to the appropriate office and SPPMO shall maintain a copy of the fax receipt.

The facility provided the auditor with 5 reports of allegations that had been received from other TDCJ facilities to the Plane/Henley Complex to show evidence of the documentation required by agency policy for these instances.

The auditor’s interview with the facility’s Warden and designated PREA Compliance Manager verified all reports are documented in the SPPANS system.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.63(d) Provision 115.63(d) states, “The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.”

TDCJ Safe Prisons/PREA Plan (p. 25) states any TDCJ warden or departmental office receiving notification from an outside agency that an offender in the outside agency’s custody alleged sexual abuse while assigned in TDCJ custody shall ensure the allegation is forwarded to the PREA Ombudsman for possible investigation.

The facility informed the auditor it had received 5 allegations from other facilities that abuse had been alleged to have occurred at the Plane/Henley Complex. The auditor reviewed the files provided and confirmed the Plane/Henley facility investigators had fully investigated the allegations as required by this provision.

The auditor was provided a telephone interview with an Agency Head Representative for TDCJ who stated reports received from one facility to another, are referred to OIG and PREA Ombudsman and investigated in the same manner as if an inmate were to make an internal report. The auditor’s interview with the Warden and designated PREA Compliance Manager confirmed the facility uses all available resources to investigate these allegations to the best of their abilities.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.64</th>
<th>Staff first responder duties</th>
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<tbody>
<tr>
<td><strong>Auditor Overall Determination:</strong></td>
<td>Meets Standard</td>
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<tr>
<td><strong>Auditor Discussion</strong></td>
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<tr>
<td><strong>Documents Reviewed:</strong></td>
<td>(Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (02/2019)</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Operations Manual 05.01: Sexual Abuse Response and Investigation (02/2020)</td>
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<tr>
<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<td>Facility investigative staff</td>
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<td>Non-security staff</td>
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<td>Random staff</td>
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<td>Targeted inmates</td>
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<tr>
<td><strong>Findings (by provision):</strong></td>
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</tr>
<tr>
<td><strong>115.64(a)</strong> Provision 115.64(a) states, “Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.”</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (p. 26) states after learning of an allegation that an offender was sexually abused, the first correctional officers responding to the report shall:</td>
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<tr>
<td>Separate the alleged victim and assailant (1)</td>
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<tr>
<td>Preserve and protect the crime scene, if applicable, until appropriate steps can be taken to collect any evidence (2)</td>
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<td>Be required to request that the alleged victim not take any actions that could destroy physical evidence, as required by this provision (3), and</td>
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<tr>
<td>Ensure the alleged abuser does not take any actions that could destroy physical evidence, as required by this provision (4).</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Operations Manual 05.01: Sexual Abuse Response and Investigation (p. 3-4) details the needed actions of first responders as required by this provision. TDCJ Administrative Directive AD-16.03: Evidence Handling (p. 1-4) states all employees shall take steps necessary to protect life and property as well as provide for the identification, protection, preservation, and collection of physical evidence in such a manner as to maintain its integrity. The document then lists the need for responding staff to secure a crime scene and maintain evidence as well as the need for parties involved to remain separated.</td>
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<tr>
<td>The auditor learned in the facility’s response to the PAQ that the first response duties required by this provision are required for all PREA incidents of sexual abuse reports and sexual harassment reports. The auditor reviewed the facility’s PREA incidents and confirmed that all allegations were given appropriate first response actions including separating alleged victims from alleged abusers and, when physical evidence could be obtained based on the allegation, the alleged victim was requested, and the alleged abuser were secured, to ensure physical evidence was preserved as required by this provision.</td>
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<td>The facility reported in the PAQ there had been 28 allegations of sexual abuse and/or sexual harassment in the past 12 months. Of these allegations, 24 had required staff to separate the alleged abuser from the alleged victim and 19 of these incidents were within a time period that still allowed for collection of evidence. The auditor reviewed the facility’s PREA case files and found the reports contained accurate information and procedures as reported in the PAQ, however the facility had included reports of sexual harassment as well as allegations of sexual abuse in the total calculation requested for sexual abuse allegations in the PAQ. Therefore, the auditor concluded there had been 26 total cases of inmate sexual abuse</td>
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The auditor reviewed the facility’s PREA case files and confirmed all incidents of sexual abuse and sexual harassment follow the separation and evidence preservation procedures, as necessary, based on the evidence on hand.

The auditor interviewed random security staff who confirmed their knowledge and responsibilities regarding first response of a PREA Incident and that these steps included the requirements outlined in this provision. The auditor also interviewed inmates who had reported sexual abuse and they also confirmed they were separated from their alleged abuser and the facility had taken steps to preserve evidence, as necessary, based on the allegations made and physical evidence available.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.64(b) Provision 115.64(a) states, “If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.”

TDCJ Safe Prisons/PREA Plan (p. 26-27) states if the first staff responder is not a correctional officer, the responder shall be required to request the alleged victim not take any actions that could destroy physical evidence and shall immediately notify a correctional officer.

The auditor reviewed the facility’s PREA cases and found there had been 4 reported allegations made to a non-security staff member. The auditor reviewed these case files and confirmed the appropriate first response actions were taken as required by agency policy and this provision.

The auditor interviewed non-security staff and all verified they were aware of their responsibility to request an alleged victim preserve physical evidence and to alert security staff to the allegation immediately.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.65</th>
<th>Coordinated response</th>
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<tr>
<td></td>
<td>Auditor Overall Determination: Meets Standard</td>
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<td></td>
<td>Auditor Discussion</td>
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<tr>
<td></td>
<td><strong>Documents Reviewed:</strong> (Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td></td>
<td>TDCJ Safe Prisons/PREA Plan (02/2019)</td>
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<tr>
<td></td>
<td>TDCJ Safe Prisons/PREA Program, Plane/Henley Complex Sexual Abuse Coordinated Response Plan</td>
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<td></td>
<td>Agency Response to PAQ</td>
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<td></td>
<td><strong>Interviews:</strong></td>
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<td></td>
<td>Warden</td>
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<td></td>
<td><strong>Findings (by provision):</strong></td>
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<td><strong>115.65 (a)</strong> Provision 115.65 states, “The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.”</td>
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<td>The auditor was provided a copy of the TDCJ Safe Prisons/PREA Plan (p. 26-27) which details the first responder duties for a sexual abuse incident. The auditor was also given the TDCJ Safe Prisons/PREA Program, Plane/Henley Complex Sexual Abuse Coordinated Response Plan (p. 1-7) which further details the coordinated actions of all parties involved in a sexual abuse incident to include, first responders, medical and mental health, investigators, and facility leadership. The plan lists detailed contact information for each of these entities and explicitly states the duties expected of each.</td>
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<td>The auditor interviewed the facility’s Warden regarding the facility’s Coordinated Response Plan. The Warden had recently been assigned their position to the complex but confirmed to the auditor they had reviewed the Coordinated Response Plan upon their assignment and had also reviewed PREA cases received while at the facility to confirm the plan was working as intended by this provision.</td>
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<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td><strong>Corrective Action:</strong></td>
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<td></td>
<td>The auditor recommends no corrective action.</td>
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<tr>
<td>115.66</td>
<td>Preservation of ability to protect inmates from contact with abusers</td>
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<td></td>
<td>Auditor Overall Determination: Meets Standard</td>
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<td>Auditor Discussion</td>
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<td><strong>Documents Reviewed:</strong> (Policies, directives, forms, files, records, etc.)</td>
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<td></td>
<td>TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders 03/01/2017</td>
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<td></td>
<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<td>Agency Head Representative</td>
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<td>Warden</td>
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<td><strong>Findings (by provision):</strong></td>
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<td>15.66(a) Provision 115.66(a) states, “Neither the agency nor any other governmental entity responsible for collective bargaining on the agency’s behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</td>
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<td>The facility informed the auditor in the PAQ its agency does not have collective bargaining.</td>
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<td>The auditor was provided a telephone interview with a TDCJ Agency Head Representative who confirmed TDCJ staff do not have an agreement in place concerning this standard. The facility’s Warden also verified this information in interview with the auditor.</td>
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<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td><strong>Corrective Action:</strong></td>
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<td>The auditor recommends no corrective action.</td>
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115.67 Agency protection against retaliation

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (03/01/2017)
- Agency Response to PAQ

Interviews:

- Agency Head Representative
- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Designated staff members charged with monitoring staff/inmates
- Targeted inmates

Site Review Observations:

- PREA case files

Findings (by provision):

**115.67(a)** Provision 115.67(a) states, “The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff and shall designate which staff members or departments are charged with monitoring retaliation.”

TDCJ Safe Prisons/PREA Plan (p. 24) states offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other offenders or staff. The plan designates the SPPOM will monitor for retaliation. TDCJ Executive Directive PD-29: Sexual Misconduct with Offenders (p. 1) states employees are prohibited from subjecting another employee, offender or other individual to harassment or retaliation for reporting or cooperating with an investigation of alleged sexual misconduct.

The auditor was informed by the facility’s Warden that staff and inmate retaliation monitoring occur for all incidents of sexual abuse allegations that are determined to not be unfounded. The auditor interviewed the facility’s designated PREA Compliance Manager regarding the facility’s retaliation monitoring practices. The designated PCM informed the auditor they monitor inmates for retaliation as outlined in agency policy and staff retaliation monitoring occurs by the facility’s Majors. The auditor interviewed these staff about their role in monitoring staff for reporting or cooperating with a PREA incident; the staff verified the monitoring is performed and also gave the auditor sound example of how the monitoring is conducted and recorded, as necessary.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.67(b)** Provision 115.67(b) states, “The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.”

TDCJ Safe Prisons/PREA Plan (p. 24) states as appropriate, multiple protective measures may be taken, such as housing changes or transfers for offender abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offender or staff who fear retaliation for reporting sexual abuse or sexual harassment or cooperating with investigations.

The auditor reviewed the facility’s PREA case files and witnessed evidence that the facility had employed protection measures to include housing changes for alleged abusers or victims, staff reassignments to separate alleged staff from alleged victims until the investigation was determined to be unfounded, and every case had included the offering of an Offender Victim Representative and victim brochure information on emotional support services to the inmate victim.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative who confirmed staff and offender retaliation monitoring occur as required by TDCJ policy and this standard. The facility’s Warden and designated PREA
Compliance Manager verified staff assignments, inmate housing assignments, employment reviews and other factors are monitored, as necessary.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.67(c) Provision 115.67(c) states, “For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.”

TDCJ Safe Prisons/PREA Plan (p. 24) states for at least 90 days following a report of sexual abuse, the USPPM shall monitor and document the conduct and treatment of offenders or staff who reported the sexual abuse, and of offenders who were reported to have been victims of sexual abuse, for changes that may indicate possible retaliation by offenders or staff and shall act promptly to address any retaliation.

The facility informed the auditor in the PAQ that retaliation monitoring occurs for at least 90 days and there had been no times in the past 12 months in which an incident of retaliation had occurred at the facility. The auditor learned in reviewing the facility’s PREA case files that the facility also monitors staff and inmates for retaliation from sexual harassment cases.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative who confirmed staff and inmate retaliation monitoring occur as required by TDCJ policy and this standard. The Warden informed the auditor there had been a change over of leadership and PREA staff in the past 6 months. There were a few instances in which retaliation monitoring had not been clearly completed for 90 days so the designated PREA Compliance Manager had been tasked with extending the monitoring to ensure the safety of the staff and/or inmates involved in the incidents in question. The auditor interviewed the designated PCM who confirmed 3 out of the 28 allegations received in the past 12 months had had extended retaliation monitoring to ensure the inmates/staff were not being retaliated against due to the lapse in documentation during the leadership and PREA staff change over at the beginning of the year. The PCM confirmed there were no known threats of retaliation in these cases and the extension in the monitoring was only an effort to ensure no documentation was missed. The PCM also confirmed to the auditor that retaliation monitoring occurs for both sexual abuse and sexual harassment cases that are not determined to be unfounded.

The facility has a policy in place that requires 90 days of retaliation monitoring for sexual abuse cases. The facility had documentation that the 90-day retaliation monitoring is also conducted for sexual harassment cases and the facility’s designated PREA Compliance Manager confirmed that this occurs for sexual abuse and sexual harassment allegations, which exceeds the standard.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility exceeds standards in this provision.

115.67(d) Provision 115.67(d) states, “In the case of inmates, such monitoring shall also include periodic status checks.”

TDCJ Safe Prisons/PREA Plan (p. 24) states the monitoring shall include periodic status checks.

The auditor reviewed the retaliation monitoring which did include periodic status checks as required by this provision. Each showed a physical status check was performed by the designated PREA Compliance Manager and an interview with the inmate about their status specific to any possible retaliation after the incident took place.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.67(e) Provision 115.67(e) states, “If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.”

TDCJ Safe Prisons/PREA Plan (p. 24) states if any other individual cooperates with an investigation and expresses a fear of retaliation, TDCJ shall take appropriate measures to protect that individual against retaliation.

The facility’s designated staff charged with monitoring retaliation confirmed multiple safety and security measures may be used, depending on the situation and should any safety concerns be detected for any involved party, the person would be appropriately protected as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:
The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.68</th>
<th>Post-allegation protective custody</th>
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<tr>
<td><strong>Auditor Overall Determination:</strong></td>
<td>Meets Standard</td>
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<tr>
<td><strong>Auditor Discussion</strong></td>
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<tr>
<td><strong>Documents Reviewed:</strong></td>
<td>(Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (02/2019)</td>
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<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<td>Warden</td>
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<td>Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)</td>
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<td>Facility investigative staff</td>
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<td>Targeted inmates</td>
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<td><strong>Site Review Observations:</strong></td>
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<tr>
<td>PREA case files</td>
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<td><strong>Findings (by provision):</strong></td>
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<td><strong>115.68(a)</strong> Provision 115.68 states, “Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.”</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (p. 18) states offenders at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all available alternatives has been made, and it is determined there is no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the offender in involuntary segregation while completing the assessment for no longer than 24 hours. The plan also states every 30 days, the unit shall conduct a review to determine if there is a continuing need for separation of the offender from general population.</td>
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<td>The facility reported there had been no inmate moves to involuntary segregation as a result of needing to protect an inmate who had alleged to have suffered sexual abuse. The auditor reviewed the facility PREA investigations and confirmed there had been no involuntary segregation as prohibited by this provision.</td>
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<td>The auditor interviewed the facility’s Warden, designated PREA Compliance Manager and facility investigators regarding the use of segregated housing to protect inmates who had reported sexual abuse. All confirmed involuntary segregated housing used in this manner for sexual abuse reports would follow agency policy. The auditor interviewed inmates who had reported sexual abuse who also confirmed they had not been placed in segregated housing after making the allegation to facility staff.</td>
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<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td><strong>Corrective Action:</strong></td>
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<td>The auditor recommends no corrective action.</td>
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Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive ED-02.29 (rev. 1): Records Management (05/30/2014)
- TDCJ Records Retention Schedule (09/2020)
- Agency Response to PAQ

Interviews:

- Warden
- PREA Coordinator (PREA Ombudsman)
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Facility investigative staff
- Targeted inmates

Site Review Observations:

PREA case files

Findings (by provision):

115.71(a) Provision 115.71(a) states, “When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.”

TDCJ Safe Prisons/PREA Plan (p. 25) states investigations of sexual abuse, threatened sexual abuse and sexual harassment shall be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 7) states after reporting serious or unusual incidents, the warden or supervisor shall conduct a prompt, thorough investigation and complete an Administrative Incident Review.

The auditor reviewed the facility’s investigations files for 28 investigations that had been conducted in the past 12 months as well as 2 investigations of substantiated allegations on staff misconduct that had occurred prior to the last 12 months. Each case showed a thorough and objective investigation was conducted as soon as facility staff had been notified of the allegation. The auditor reviewed investigations that were conducted from third-party complaints and anonymous reports as well. All were conducted as required by this provision. The auditor learned every case gets referred through their Emergency Actions Center (EAC) to the Office of Inspector General for initial review. If there is possible criminality, the OIG will complete the investigation. If there is no criminality suspected, the OIG refers the case back to facility investigators for an administrative investigation.

The facility investigators and designated PREA Compliance Manager confirmed all investigations are completed either by the OIG or facility investigators if the OIG declines to investigate. These staff also verified the cases are investigated immediately and the investigators, PREA staff and facility leadership review each investigation to ensure it has been thoroughly and objectively completed as required by agency policy and this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.71(b) Provision 115.71(b) states, “Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.”

TDCJ Safe Prisons/PREA Plan (p. 26) states investigations involving allegations of sexual abuse shall be conducted by investigators who have received special training in sexual abuse investigations pursuant to this plan.

The auditor was informed in the PAQ the facility has 31 administrative investigators at the Plane/Henley Complex and all had been trained to conduct sexual abuse investigations as required. The auditor reviewed the facility’s PREA case files and
confirmed each investigator who had completed the investigation had been trained pursuant to § 115.34.

The auditor interviewed the facility’s investigators who were able to provide the auditor with examples of the training received pursuant to § 115.34. Each investigator was able to give the auditor examples of how they applied this training to their investigations to show evidence of compliance with this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.71(c) Provision 115.71(c) states, “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.”

TDCJ Safe Prisons/PREA Plan (p. 26-27) states all allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The plan states investigations shall include interviews with alleged victims, suspected assailants, and witnesses, a review of prior complaints and reports of sexual abuse involving the alleged assailant, review of video surveillance where available and any evidence, including physical evidence.

The auditor reviewed the facility’s administrative investigations which detailed the evidence collected, depending on the nature of the allegation and when, where, and how the evidence was collected, as necessary. All reports showed evidence had been collected as required for preservation of direct and circumstantial evidence. All reports also gave various forms of evidence had been reviewed to include video, inmate and staff assignments, witness statements and other relevant factors as intended by this provision.

The auditor’s interviews with investigative staff confirmed the evidence is sought, evaluated, and collected so that evidence is preserved and applied as required by this provision. Each investigator was able to give examples of how this is accomplished in interview with the auditor.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.71(d) Provision 115.71(d) states, “When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

TDCJ Safe Prisons/PREA Plan (p. 28) states when the evidence supports criminal prosecution, OIG shall conduct compelled interviews only after consulting with prosecutors to ensure the interviews do not impede subsequent criminal prosecution.

There were no investigations where compelled interviews had been conducted by the facility. The facility leadership informed the auditor these types of interviews would be handled by OIG and that they have policies that govern the procedures for this that are compliant with the PREA Standards. The auditor informally interviewed the OIG investigator assigned to the facility who confirmed the practice and policy in place is compliant with this provision, should compelled interviews be necessary for a facility’s case.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.71(e) Provision 115.71(e) states, “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.”

TDCJ Safe Prisons/PREA Plan (p. 28-29) states an offender who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of the allegation. The plan also states the credibility of an alleged victim, assailant or witness shall be assessed on an individual basis and not on the status as an offender or staff member.

The auditor reviewed the facility’s investigation files and confirmed each case had given equal weight when judging the credibility of an alleged victim, suspect or witness and not on the basis of the person’s status as staff or inmate.

The auditor interviews with the facility’s investigators confirmed they are trained and practice the ability to judge each person’s involvement with a case on an individual basis and not on their status as inmate or staff. Staff also confirmed they would not require a polygraph examination prior to proceeding with the investigation of an allegation of sexual abuse or sexual harassment.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115. 71(f)** Provision 115.71(f) states, “Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.”

TDCJ Safe Prisons/PREA Plan (p. 29-30) states staff shall document the description of physical and testimonial evidence in the body of the report, the reasoning behind credibility assessments, and investigative facts and findings. The plan also states information regarding staff action or inaction that may have contributed to the alleged abuse shall be included in the investigative report. TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 7-8) state the Administrative Incident Review shall include a review of the circumstances of the incident, a consideration of whether the actions taken were consistent with TDCJ policies and procedures, an identification of actions that could be taken to avoid future incidents of a similar nature, and a determination of whether employee action or inaction was a factor in the incident.

The auditor’s review of the facility’s investigation reports showed administrative investigations documented the investigator’s findings of staff actions/failures and all available descriptions of physical and testimonial evidence, credibility assessments, and investigations facts and findings.

The interviews with investigation staff confirmed all aspects of an investigation are required to be included in the investigation report. The auditor was informed by the facility that the findings of the investigation are made by a committee that adds the finding and staff actions and/or failures into the reporting system after reviewing all available evidence. The auditor confirmed all staff who assist in making this finding had been trained as an investigator, pursuant to § 115.34.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115. 71(g)** Provision 115.71(g) states, “Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.”

TDCJ Safe Prisons/PREA Plan (p. 29-30) states criminal investigations shall be documented in accordance with OIG policies and procedures. The plan states staff shall document the description of physical and testimonial evidence in the body of the report and a description of physical and testimonial evidence.

The facility provided the auditor with 5 total cases of criminal investigations that showed evidence that the written reports contained the physical, testimonial and documentary evidence as required by this provision.

The auditor interviewed the facility’s administrative investigators who confirmed for criminal cases, the OIG would be making the primary report and documenting the information as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115. 71(h)** Provision 115.71(h) states, “Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.”

TDCJ Safe Prisons/PREA Plan (p. 30) states substantiated allegations of conduct that appear to be criminal shall be referred for prosecution in accordance with OIG policies and procedures.

The facility had 2 incidents of possible criminality since the facility’s last PREA Audit in 2019. In the cases, criminal prosecution had been sought for the alleged perpetrator. The auditor reviewed the case files and confirmed that the alleged perpetrators had been referred for prosecution and that the case files included documentation of this, as required by this provision. Three other cases had been referred to the OIG for investigation, however there had not been enough evidence to pursue prosecution by the OIG.

The facility’s Warden had not been assigned to the facility at the time of the criminal cases. The Warden confirmed the agency would refer to any possible criminal cases for prosecution through the OIG.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115. 71(i)** Provision 115.71(i) states, “The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.”

TDCJ Safe Prisons/PREA Plan (p. 30) states all administrative and criminal investigations shall be retained in accordance
The auditor reviewed the facility’s reports of administrative and criminal investigations while onsite and confirmed they had been retained as required.

The auditor interviewed the facility’s designated PREA Compliance Manager who confirmed the cases are retained according to the schedule provided in the PAQ.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 71(j) Provision 115.71(j) states, “The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.”

TDCJ Safe Prisons/PREA Plan (p. 28) states the departure of the alleged assailant or victim from employment or custody of the TDCJ shall not be the basis for terminating an investigation.

The auditor reviewed the facility’s investigation files and saw evidence that alleged perpetrators had been removed from the facility during their involved investigation and the investigation had continued and concluded regardless of the person being in employment or controlled by the facility.

The auditor’s interview with the Warden and investigative staff verified cases are concluded regardless of the departure of an alleged abuser or victim from custody or employment. The facility’s designated PREA Compliance Manager confirmed that should staff or inmates depart the facility, the investigation would continue until completed.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 71(l) Provision 115.71(l) states, “When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.”

TDCJ Safe Prisons/PREA Plan (p. 29) states unit staff conducting OPIs shall cooperate with the OIG when applicable to avoid interfering with possible criminal investigation related to the same incident.

The auditor was provided a telephone interview with the TDCJ PREA Ombudsman who confirmed the OIG provides monthly reports to their office and the TDCJ on the progress of all open investigations. A quarterly meeting with both entities is also held to discuss investigative updates. The auditor interviewed the Warden, designated PREA Compliance Manager and investigative staff regarding this provision and all reported they would stay informed on the process of the case if one was handled by the OIG.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.72</th>
<th>Evidentiary standard for administrative investigations</th>
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<tbody>
<tr>
<td><strong>Auditor Overall Determination:</strong> Meets Standard</td>
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<tr>
<td><strong>Auditor Discussion</strong></td>
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<tr>
<td><strong>Documents Reviewed:</strong> (Policies, directives, forms, files, records, etc.)</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (02/2019)</td>
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<tr>
<td>TDCJ Correctional Training and Staff Development Lesson Plan SPPCTI: Conducting a Thorough Investigation (09/01/2019)</td>
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<td>Agency Response to PAQ</td>
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<td><strong>Interviews:</strong></td>
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<tr>
<td>Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)</td>
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<td>Facility investigative staff</td>
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<td><strong>Site Review Observations:</strong></td>
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<td>PREA case files</td>
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<tr>
<td><strong>Findings (by provision):</strong></td>
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<tr>
<td>115.72 (a) Provision 115.72 states, “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.”</td>
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<tr>
<td>TDCJ Safe Prisons/PREA Plan (p. 28) states no standard higher than preponderance of evidence shall be imposed in determining if allegations of sexual abuse or sexual harassment are substantiated. TDCJ Correctional Training and Staff Development Lesson Plan and Presentation SPPCTI: Conducting a Thorough Investigation state the highest standard a facility can set to move forward with administrative action is a preponderance of the evidence. The meaning of this is then defined as more than 50% of the evidence supports the allegation occurred.</td>
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<tr>
<td>The auditor reviewed the facility’s administrative investigation files and based on the description of the evidence listed in the reports, the auditor saw evidence the investigators effectively and correctly used preponderance of evidence when making their findings in each case.</td>
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<tr>
<td>The auditor interviewed the facility investigators regarding this provision. All confirmed for administrative cases, preponderance of evidence is the evidentiary standard when making a finding and all were able to define that standard to the auditor.</td>
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<tr>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td><strong>Corrective Action:</strong></td>
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<tr>
<td>The auditor recommends no corrective action.</td>
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### 115.73 Reporting to inmates

| Auditor Overall Determination: | Meets Standard |

#### Auditor Discussion

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Safe Prisons/PREA Program Offender Protection Investigation Form (07/2014)
- TDCJ Safe Prisons/PREA Program Staff-on Offender Sexual Abuse Investigation Worksheet (07/2014)
- TDCJ Safe Prisons/PREA Program UCC Notification of OPI Outcome Form (05/2014)
- Agency Response to PAQ

#### Interviews:

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Targeted inmates

#### Site Review Observations:

**PREA case files**

Findings (by provision):

**115.73(a)** Provision 115.73(a) states, "Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded."

TDCJ Safe Prison/PREA Plan (p. 27, 30) states offenders shall be notified of relevant information regarding criminal investigations, in accordance with SPPOM. The plan states following an OPI committee review, the committee shall inform the offender if the allegations were determined to be substantiated, unsubstantiated or unfounded. The facility provided the auditor with the TDCJ Safe Prisons/PREA Program UCC Notification of OPI Outcome Form which has an area for cases of Sexual Abuse, Sexual Harassment, Violence, Threat of Violence or Retaliation to be marked as determined to be substantiated, unsubstantiated or unfounded. The form is in both English and Spanish.

The auditor reviewed the facility’s investigations for both administrative and OIG investigations. In each case to include sexual harassment allegations, the auditor found a notification of inmate was provided to the inmate victim.

The auditor interviewed the facility’s Warden and designated PREA Compliance Manager who confirmed all inmates who allege sexual abuse or sexual harassment are given notices as to the administrative findings of their allegation. The auditor interviewed inmates who had reported sexual abuse in the facility, and they confirmed to the auditor they had been notified of the findings of their allegation.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.73(b)** Provision 115.73(b) states, "If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate."

TDCJ Safe Prison/PREA Plan (p. 28) states TDCJ SPPM shall ensure the relevant criminal information is received from the OIG in order to inform the offender.

The facility had 2 cases investigated by the OIG that had concluded. For these cases, the alleged victims had been given notification of the referral to OIG and findings, as required by this standard.

The PREA Compliance Manager informed the auditor that they and the OIG stay in consistent communication on the status of their referred cases. The auditor was provided an informal conversation by phone with the facility’s assigned OIG staff who confirmed this.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.73(c)** Provision 115.73(c) states, "Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is
unfounded) whenever: (1) The staff member is no longer posted within the inmate’s unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.”

TDCJ Safe Prison/PREA Plan (p. 27) states if an offender is determined to have been a victim of staff-on-offender sexual abuse, the warden shall inform the offender when the staff member is no longer assigned to the offender’s unit or if the staff member is no longer employed by the TDCJ. The plan states when the sexual abuse is determined criminal, the SPPMO shall inform the offender when the staff member has been indicted on a charge related to sexual abuse within the unit or the staff member has been convicted on a charge related to sexual abuse within the unit. The facility provided the auditor with the TDCJ Safe Prisons/PREA Program Staff-on Offender Sexual Abuse Investigation Worksheet which has an area for the notification outcome to be recorded and shows boxes that may be checked, with areas to record staff names, when the offender is needing to be notified of staffing assignments, employment, criminal charges, indictments, and convictions, as necessary.

The auditor learned the facility’s notification to inmate is a form generated by their document management system and they are required to note agency actions (if any) on staff for all allegations of sexual abuse. In the past 12 months, the facility had made 28 notifications to inmates on their administrative cases, and 1 notification of an OIG notification.

There were no inmates in custody at the time of the onsite audit who had accused staff of sexual abuse for the auditor to interview regarding compliance with this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.73(d) Provision 115.73(d) states, “Following an inmate’s allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.”

TDCJ Safe Prison/PREA Plan (p. 27-28) states if the offender alleges to have been a victim of offender-on-offender sexual abuse, the SPPMO will subsequently inform the alleged victim when the alleged assailant has been indicted on a charge related to sexual abuse within the unit or the alleged assailant has been convicted on a charge related to sexual abuse within the unit. The facility provided the auditor with the TDCJ Safe Prisons/PREA Program Offender Protection Investigation Form which has an area for the notification outcome to be recorded and shows boxes that may be checked, with areas to record inmate names, when the offender is needing to be notified of criminal charges, indictments, and convictions, as necessary.

The facility provided the auditor with evidence that 2 cases had been referred for prosecution and were indicted, and no cases had resulted in convictions at the time of the onsite audit.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 73(e) Provision 115.73(e) states, “All such notifications or attempted notifications shall be documented.”

TDCJ Safe Prison/PREA Plan (p. 28) states all offender notifications or attempted notifications shall be documented. The facility provided the auditor with the TDCJ Safe Prisons/PREA Program Offender Protection Investigation Form and TDCJ Safe Prisons/PREA Program Staff-on Offender Sexual Abuse Investigation Worksheet. Each have areas for the inmate notification of sexual abuse and/or sexual harassment outcome to be recorded.

The facility provided the auditor with evidence that 2 cases had been referred for prosecution and were indicted, and no cases had resulted in convictions at the time of the onsite audit. The auditor was shown evidence of the notifications to inmates for these cases, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.76</th>
<th>Disciplinary sanctions for staff</th>
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<td><strong>Auditor Overall Determination:</strong> Meets Standard</td>
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**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive PD-29 (rev. 5): Sexual Misconduct with Offenders (03/01/2017)
- Agency Response to PAQ

**Site Observations:**

- Emergency Action Committee Incident Reviews
- PREA case files

**Findings (by provision):**

**115.76(a)** Provision 115.76(a) states, “Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.”

TDCJ Safe Prisons/PREA Plan (p. 31) states disciplinary actions related to staff-on-offender sexual abuse or sexual harassment violations shall be handled in accordance with PD-22, “General Rules of Conduct and Disciplinary Action Guidelines for Employees.” TDCJ Executive Directive PD-22: General Rules of Conduct and Disciplinary Action Guidelines for Employees (p. 2-33) lists disciplinary sanctions up to and including termination for violation of agency policy, as necessary.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.76(b)** Provision 115.76(b) states, “Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.”

TDCJ Safe Prisons/PREA Plan (p. 39) states termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

The facility reported in the past 12 months 2 staff have been terminated for violating agency sexual abuse policies. The auditor reviewed these cases as provided by the facility. The violating staff were removed from the facility and proper response and investigation took place immediately.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.76(c)** Provision 115.76(c) states, “Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”

TDCJ Safe Prisons/PREA Plan (p. 39) states disciplinary sanctions for violations of TDCJ policies relating to sexual abuse or sexual harassment, that do not involve actual sexual abuse, shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

The facility reported in the past 12 months 1 incident for violating agency policy relating to sexual abuse or sexual harassment, other than actually engaging in sexual abuse had occurred at the facility. The auditor reviewed the case provided by the facility and determined the allegations was staff on inmate sexual abuse by contact and the facility had administratively found the allegation to be substantiated. The auditor reviewed the facility’s PREA Case files and learned that other actions that had not actually resulted in a form sexual abuse had occurred in 2 other cases: these actions were failure to properly report allegations of sexual abuse and/or sexual contact (delay in reporting had not hindered evidence collection). In these cases, the facility provided the auditor with documentation for the staff members’ training and corrective action (not termination), which the auditor found appropriate for each case, given the violations and staff history.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.76(d)** Provision 115.76(d) states, “All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.”

TDCJ Safe Prisons/PREA Plan (p. 39) states all terminations for violations of TDCJ sexual abuse or sexual harassment policies, or resignations in lieu of termination, shall be reported to OIG and to any relevant licensing bodies, unless the activity was clearly not criminal.

The facility reported in the past 12 months 1 staff had been reported to law enforcement or licensing boards following the staff’s termination for violating agency sexual abuse or sexual harassment policies. The auditor reviewed this case and was provided information reported to relevant licensing bodies; all actions taken by the facility were consistent with the requirements of this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

TDCJ Safe Prisons/PREA Plan (02/2019)
Agency Response to PAQ

Interviews:

Warden
Assistant Warden

Site Review Observations:

PREA case files

Findings (by provision):

15.77(a) Provision 115.77(a) states, “Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.”

TDCJ Safe Prisons/PREA Plan (p. 39-40) states any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to applicable law enforcement agencies, and to relevant licensing bodies, unless the activity was clearly not criminal.

The facility reported in the PAQ no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. The auditor reviewed the facility’s PREA case files and confirmed this report.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115. 77 (b) Provision 115.77(b) states, “The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.”

TDCJ Safe Prisons/PREA Plan (p. 40) states the unit shall take appropriate remedial measures and shall consider whether to prohibit further contact with offenders, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by a contractor or volunteer.

The auditor interviewed the facility Warden and Assistant Warden regarding this provision. Both staff confirmed any violation of sexual abuse or sexual harassment by a contractor or volunteer would result in appropriate remedial measures.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
**Disciplinary sanctions for inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Disciplinary Rules and Procedures for Offenders in English and Spanish (08/2019)
- TDCJ Executive Directive ED-03.75 (rev. 6): Offender Disciplinary Procedures (04/17/2019)
- TDCJ Sex Offender Rehabilitation Programs SOTP 01.04: Referral from Other Sources (02/2013)
- Agency Response to PAQ

**Interviews:**

- Warden
- Facility investigative staff
- Incident Review Team
- Inmate disciplinary staff
- Mental health staff

**Site Review Observations:**

- PREA case files

**Findings (by provision):**

### 115.78(a)

Provision 115.78(a) states, "Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse."

TDCJ Safe Prisons/PREA Plan (p. 31) states offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse, sexual harassment, extortion, substantiated acts of violence, or following a criminal finding of guilt for offender-on-offender sexual abuse in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders. TDCJ Disciplinary Rules and Procedures for Offenders (p. 23) states offenders who engage in sexual abuse or sexual misconduct are subject to disciplinary sanctions.

The facility reported in the PAQ 1 inmate had been disciplined for an administrative finding of inmate-on-inmate sexual abuse that occurred at the facility. The auditor reviewed this case and found the disciplinary sanctions imposed were adequate for the inmate-on-inmate sexual abuse by contact (resulting from horseplay).

The auditor interviewed the facility’s Warden and staff responsible for overseeing inmate disciplinary and both confirmed inmates are held accountable, both administratively and criminally, for engaging in sexual abuse at the facility. The auditor also interviewed the facility’s investigative staff and Incident Review team staff who also confirmed any inmate misconduct found during an investigation would be appropriately handled, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

### 115.78(b)

Provision 115.78(b) states, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories."

TDCJ Safe Prisons/PREA Plan (p. 31) states sanctions shall be appropriate to the nature of abuse committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. TDCJ Disciplinary Rules and Procedures for Offenders (p. 22-23) states penalties given to other offenders for the same or similar violations, as well as an offender’s disciplinary record and nature and seriousness of offenses will be a guideline for appropriate sentences for offenders found guilty of a disciplinary violation.

The facility reported in the PAQ 1 inmate had been disciplined for an administrative finding of inmate-on-inmate sexual abuse that occurred at the facility. The auditor reviewed this case and found the disciplinary sanctions imposed were adequate for the inmate-on-inmate sexual abuse by contact when compared to the inmate’s history and nature of the offense.
The auditor interviewed the facility’s Warden. The Warden verified sexual abuse and sexual harassment and consensual sexual activity is not tolerated at the facility and any violation of these would result in sanctions, as required, based on the offense.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.78 (c) Provision 115.78(c) states, “The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.”

TDCJ Safe Prisons/PREA Plan (p. 31) states the disciplinary process shall consider whether an offender’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

The facility Warden and Incident Review Team staff were interviewed by the auditor who confirmed that any mental disability or illness is considered. The Warden and facility Mental Health staff confirmed in interviews with the auditor the facility frequently houses inmates who may have mental disability or illness and these factors are considered in any disciplinary actions and reviews for PREA cases.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.78 (d) Provision 115.78(d) states, “If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.”

TDCJ Safe Prisons/PREA Plan (p. 31) states if the unit offers therapy, counseling, or other interventions designed to address and correct possible underlying reasons or motivations for the abuse, consideration shall be made to determine if participation should be a requirement for access to programming or other benefits. TDCJ Sex Offender Rehabilitation Programs SOTP 01.04: Referral from Other Sources (p. 1) states referrals from TDCJ unit are accepted for offenders who have mental health needs and are put into appropriate contact with professionals, as necessary.

The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility had no criminal or administrative findings that showed an inmate may have perpetrated abuse on another inmate as a result of underlying reasons or motivations for abuse. The auditor reviewed the facility’s PREA case files to confirm no such cases had needed referral to the Mental Health services for addressing underlying reasons or motivations of abuse.

The auditor interviewed mental health staff at the facility who confirmed the ability to offer therapy, counseling or other interventions as required by this provision. The staff verified with the auditor that they may be involved in assisting the facility with PREA case assessments when requested.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.78 (e) Provision 115.78(e) states, “The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.”

TDCJ Safe Prisons/PREA Plan (p. 31) and TDCJ Disciplinary Rules and Procedures for Offenders (Attachment B) state an offender may be disciplined for sexual contact with staff only if it is determined the staff member did not consent to the contact.

The facility informed the auditor in the PAQ the agency will discipline an inmate for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The facility reported no such incidents of this had occurred at the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.78 (f) Provision 115.78(f) states, “For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.”

TDCJ Safe Prisons/PREA Plan (p. 31) states a report of sexual abuse made in good faith, based on a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. When the preponderance of evidence exists supporting a false allegation, the offender involved in the false allegation shall be disciplined in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders.
The facility confirmed in the PAQ it is prohibited from disciplining inmates who make allegations in good faith. The auditor reviewed the facility’s PREA investigations and inmate files and did not witness any disciplinary actions imposed on an inmate for filing a report of sexual abuse made in good faith. The auditor reviewed cases and found no cases could be absolutely determined to have been made in bad faith; the auditor did note some possible cases where inmates may have alleged actions as a retaliatory measure against staff but the facility had not had enough evidence to pursue disciplinary sanctions for these cases and no inmates had received sanctions as a result of their allegation.

The facility’s disciplinary supervisor confirmed if an inmate were to make a bad-faith PREA allegation, and they had evidence of this, the inmate may be subject to disciplinary actions. The staff confirmed the auditor’s suspicions that there may have been some retaliatory allegations made by inmates against staff as seen in the PREA case files provided to the auditor, but the staff could not prove the bad-faith allegations and no disciplinary sanctions had been imposed on the alleging inmates.

The staff verified some officers run strict units and enforce the rules to the point where some inmates may try to get these staff ‘in trouble’ by using the PREA reporting methods available. The auditor confirmed with the disciplinary staff that inmates who make good-faith allegations are never disciplined for making their report, even if the investigation shows the allegation to be false.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.78 (g) Provision 115.78(g) states, “An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.”

TDCJ Safe Prisons/PREA Plan (p. 31) states sexual misconduct between offenders is prohibited and shall result in disciplinary sanctions in accordance with the TDCJ Disciplinary Rules and Procedures for Offenders. However, sexual misconduct between offenders shall not constitute sexual abuse if it is determined the activity is consensual. TDCJ Disciplinary Rules and Procedures for Offenders (Attachment B) states intentional contact between the genitals of one offender and the genitals, mouth, anus, or hands of another offender with the consent of both participants is prohibited.

The facility’s disciplinary supervisor confirmed sexual activity that is consensual between inmates is prohibited and would result in disciplinary sanctions, but the alleged abuser would not be charged with sexual abuse if the investigation determined that the activity was consensual.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

TDCJ Safe Prisons/PREA Plan (02/2019)
Correctional Managed Health Care Policy Manual A-01.1: Access to Care (03/07/2017)
Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (08/28/2019)
Agency Response to PAQ

Interviews:

Warden
   Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager) who performs screening for risk of victimization and abusiveness
Medical staff
Mental Health staff
Targeted inmates

Site Review Observations:

Inmate medical records
PREA screening assessment/referral process

Findings (by provision):

115.81(a) Provision 115.81(a) states, “If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.”

TDCJ Safe Prisons/PREA Plan (p.17) states if a screening pursuant to this section indicates an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Correctional Managed Health Care Policy Manual E-35.2: Mental Health Evaluation (p. 1-2) states offenders with potential mental health needs will have a comprehensive mental health evaluation completed by a qualified mental health professional within 14 days of the referral, request and/or identification of mental health need.

The facility reported in the PAQ that 100 percent of its inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. The auditor reviewed mental health referrals for inmates who disclosed prior sexual victimization to the facility; the documents contained the initial referral and confirmation of follow-up visit by medical/mental health staff, as required.

The auditor witnessed the intake screening process of several inmates at the facility. One inmate had disclosed prior sexual victimization and the auditor confirmed the referral process to medical/mental health was performed by the screening staff.

The auditor interviewed the facility’s designated PREA Compliance Manager who performs the risk screening assessments of all inmates who enter the facility. The designated PCM confirmed any inmate who disclosed prior sexual victimization are referred to the facility’s mental health and medical staff, as necessary. The auditor interviewed the facility’s medical and mental health staff who confirmed they see inmates who disclose sexual victimization as required by this provision. The auditor interviewed inmates who had disclosed sexual victimization to the facility staff and all inmates interviewed confirmed they had seen mental health practitioners within a few days of arriving at the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.81(b) Provision 115.81(b) states, “If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.”

TDCJ Safe Prisons/PREA Plan (p.17) states if the screening indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow-up...
meeting with a mental health practitioner within 14 days of the intake screening. Correctional Managed Health Care Policy Manual E-35.2: Mental Health Evaluation (p. 1-2) states offenders with potential mental health needs will have a comprehensive mental health evaluation completed by a qualified mental health professional within 14 days of the referral, request and/or identification of mental health need.

The facility reported that no inmates had reported they had previously perpetrated sexual abuse, so no inmates were offered a follow-up meeting with a mental health practitioner as required by this provision.

The auditor interviewed the facility’s designated PREA Compliance Manager who performs the risk screening assessments of all inmates who enter the facility. The designated PCM confirmed any inmate who disclosed prior sexual perpetrations would be recorded in the facility’s assessment database which would alert the screener the need for a mental health referral and the PCM would be required to refer the inmate to the facility’s mental health staff. There were no inmates who had previously perpetrated sexual abuse onsite at the facility to interview regarding this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.81 (c) Provision 115.81(c) states, “If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.”

The TDCJ Plane/Henley Complex is not a jail. Based upon review and analysis of all the available evidence, the auditor has determined that this provision is not applicable to this facility’s audit.

115.81 (d) Provision 115.81(d) states, “Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.”

TDCJ Safe Prisons/PREA Plan (p.19-20) states any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Correctional Managed Health Care Policy Manual H-61.1: Confidentiality and Release of Protected Health Information (p. 2) states protected health information of offenders in any form, either verbal, written or electronic, is to be protected and safeguarded against inappropriate use or release. Correctional Managed Health Care Policy Manual H-61.1: Confidentiality and Release of Protected Health Information (p. 1) details the exceptions in which protected health information may not be kept confidential to include valid authorize release of the offender or the offender’s legally authorized representative, when state or federal laws permit the release without offender authorization, or when a valid subpoena or court order is issued requiring the release of the offender’s information.

The auditor confirmed with the facility’s designated PREA Compliance Manager that the assessment information is kept confidential in the database and PREA office, as required by this provision. The auditor’s interviews with medical staff further verified the information disclosed at screening and in the meetings with mental health staff were only accessed by those necessary for treatment and security/management decisions.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.81 (e) Provision 115.81(e) states, “Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.”

TDCJ Safe Prisons/PREA Plan (p.20) states medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.

The facility does not house inmates under the age of 18, which the auditor confirmed onsite while reviewing the facility and inmate files. The medical and mental health staff interviewed confirmed that should a person under 18 be in custody at the facility, medical and mental health staff are trained and given policies, as well as are informed through their medical practices, of the necessity to obtain consent prior to reporting sexual assault allegations that occurred outside of an institutional setting.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:
The auditor recommends no corrective action.
Access to emergency medical and mental health services

115.82  Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (08/28/2019)
- Correctional Managed Health Care Policy Manual A-01.1: Access to Care (03/07/2017)
- Agency Response to PAQ

Interviews:

- Medical staff
- Mental health staff
- Random staff
- Targeted inmates

Site Review Observations:

- PREA case files
- Medical/Mental Health referrals/files

Findings (by provision):

115.82(a) Provision 115.82(a) states, “Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.”

TDCJ Safe Prisons/PREA Plan (p. 13) states offender victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 1) states all offenders who present with complaints of sexual abuse will be immediately evaluated and examined and appropriately referred for required services. The policy further states a physical examination should be performed in all cases of sexual assault, regardless of the length of time which may have elapsed between the time of the assault and the examination. The policy then details the reporting and assault time frames and requires medical and mental health staff to complete a referral for medical treatment and crisis intervention services, as necessary.

The facility’s investigation files showed every inmate victim had been referred to medical and mental health staff as soon as the allegation had been made and of those who did not refuse the treatment, the inmates were seen by those staff as required by this provision. Of those cases in which emergency medical treatment were necessary, the auditor found the medical response was timely both to the welfare of the inmate and the preservation of evidence.

The auditor interviewed medical staff and mental health staff who confirmed the facility provides initial medical response and triage and crisis intervention services as necessary in all cases of alleged sexual abuse. The inmates are then sent to the local hospital for a Sexual Assault Forensic Exam when an inmate consents and investigators have determined the exam may be necessary. The auditor interviewed inmates who had reported sexual abuse (not penetration) and the inmates confirmed they had been seen by medical/mental health staff, as necessary for their case, and had not been charged for the services with these staff.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.82(b) Provision 115.82(b) states, “If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.”

TDCJ Safe Prisons/PREA Plan (p. 13) states if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and immediately notify the appropriate on-call medical and mental health practitioners. Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) states in the event a “qualified medical practitioner” is not available at the facility, the
The offender will be taken to the nearest Hospital Emergency Department that has medical staff qualified to perform forensic medical exams.

The auditor interviewed the medical and mental health staff at the facility who confirmed there are not always qualified medical staff onsite, however, if there was a circumstance that would inhibit these staff from being at the facility, the staff have an on-call medical/mental health staff to utilize, as necessary. The auditor interviewed security and non-security staff who verified they would secure the scene and protect the inmate upon responding to an incident of alleged sexual abuse and then contact medical for assistance, as necessary, whether that be by contacting the on-call providers or referring the inmates to the hospital for further treatment.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.82 (c) Provision 115.82(c) states, “Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.”

TDCJ Safe Prisons/PREA Plan (p. 13) states offenders who become victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, according to professionally accepted standards of care, where medically appropriate. Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) states prophylactic and sexually transmitted disease treatments will be offered to the offender, along with education, testing, and medications, as necessary.

Medical staff were interviewed by the auditor and confirmed that any victim of sexual abuse while at the facility will be offered the same level of care that a sexual assault victim would have in the community, to include access to information and items required by this provision. The staff confirmed any medical treatments that have been directed by hospital health professionals and/or practitioners in the facility would be followed throughout the treatment, as medically appropriate.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.82 (d) Provision 115.82(d) states, “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

TDCJ Safe Prisons/PREA Plan (p. 13) states treatment services shall be provided to the offender victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) states treatment services associated with sexual abuse or alleged sexual abuse will not result in the application of the Health Services Fee to the victim.

The auditor confirmed through the documentation of medical assessments that inmates who had received exams for PREA allegations had not been charged for the services they had received nor had they been required to name an abuser or cooperate with an investigation in order to receive the services.

Medical and mental health staff confirmed in interviews with the auditor inmates are not charged for these services and they are not required to name abusers or cooperate with an investigation prior to being given services as prohibited by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Correctional Managed Health Care Policy Manual G-44.1: Continuity of Care (10/30/2013)
- Correctional Managed Health Care Policy Manual G-57.01: Sexual Assault/Sexual Abuse (08/28/2019)
- Agency Response to PAQ

Interviews:

- Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Facility investigative staff
- Medical staff
- Mental health staff

Site Review Observations:

- Medical/Mental Health referrals/files
- PREA case files

Findings (by provision):

15.83(a) Provision 115.83(a) states, “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.”

TDCJ Safe Prisons/PREA Plan (p. 14) states all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile unit shall be offered medical and mental health evaluation and treatment, as appropriate.

The facility’s investigation files that the auditor reviewed showed every inmate victim had been referred to medical and mental health staff as soon as the allegation had been made and of those who did not refuse the treatment, the inmates were seen by those staff.

The auditor’s interviews with medical and mental health staff confirmed all inmates of sexual abuse and sexual harassment are offered their services as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (b) Provision 115.83(b) states, “The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.”

TDCJ Safe Prisons/PREA Plan (p. 14) states evaluation and treatment of such offender victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other units, or their release from custody. Correctional Managed Health Care Policy Manual G-44.1: Continuity of Care (p. 1) states offenders being released from TDCJ with special medical needs will have a summary entered in the health record, a transitional form will be completed and sent to TDCJ Field Services Department, and a care plan will be prepared in conjunction with Texas Correctional Office on Offenders with Medical or Mental Impairments.

The auditor interviewed the medical and mental health staff regarding this provision. The staff confirmed all necessary follow-ups and treatment plans would be followed, per their policy and TDCJ policy.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (c) Provision 115.83(c) states, “The facility shall provide such victims with medical and mental health services consistent with the community level of care.”

TDCJ Safe Prisons/PREA Plan (p. 14) states offender victims shall be provided medical and mental health services
consistent with the community level of care.

The auditor reviewed the PREA case files and medical notes for the investigations and found the services provided to the inmates were consistent with the community level of care offered to victims who are not in incarceration.

The medical and mental health staff confirmed in interview that they provide care to the inmates at the facility that is consistent with the care received in the community.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (d) Provision 115.83(d) states, “Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.”

TDCJ Safe Prisons/PREA Plan (p. 14) and Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) state offenders who have the capacity to become pregnant as a result of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

The auditor reviewed the facility’s PREA case investigations and medical notes and confirmed instances of inmate sexual abuse that included vaginal penetration were offered pregnancy tests as required by this provision.

Medical staff verified to the auditor that inmates who may have vaginal penetration while incarcerated would be offered pregnancy tests. There were no inmates who had reported vaginal penetration while incarcerated that could be interviewed regarding this provision during the onsite audit phase.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (e) Provision 115.83(e) states, “If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.”

TDCJ Safe Prisons/PREA Plan (p. 14) and Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) state if pregnancy results from the conduct described in this section, the victim shall receive timely and comprehensive information about, and access to, all lawful pregnancy-related medical services.

Medical staff verified to the auditor that inmates who may have vaginal penetration while incarcerated would receive timely and comprehensive information about, and access to, all lawful pregnancy-related medical services. There were no inmates who had reported vaginal penetration while incarcerated that could be interviewed regarding this provision during the onsite audit phase.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (f) Provision 115.83(f) states, “Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.”

TDCJ Safe Prisons/PREA Plan (p. 14) and Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) state offenders who become victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

The auditor reviewed the sexual abuse allegations in the facility’s PREA case files and confirmed that medical treatment was offered, to include treatment for sexual transmitted infections as medically appropriate, as required by this provision.

The medical staff interviewed by the auditor confirmed any sexually transmitted disease treatment would normally begin at the hospital if a SAFE was performed but may also be given at the facility if a SAFE is refused or not necessary, depending on the medical need of the inmate. The staff verified any additional or ongoing treatment would be provided to the inmate as necessary for the inmate’s welfare.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (g) Provision 115.83(g) states, “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

TDCJ Safe Prisons/PREA Plan (p. 13) and Correctional Managed Health Care Policy Manual G-57.1: Sexual Assault/Sexual Abuse (p. 2) state treatment services shall be provided to the offender victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.
The auditor confirmed through the documentation of medical assessments that inmates had not been charged for the services they had received nor had they been required to name an abuser or cooperate with an investigation in order to receive the services.

Medical and mental health staff confirmed in interviews with the auditor that inmates are not charged for these services and they are not required to name abusers or cooperate with an investigation prior to being given services as prohibited by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.83 (h) Provision 115.83(h) states, “All prisons shall attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.”

TDCJ Safe Prisons/PREA Plan (p. 14) states a mental health evaluation of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse and treatment shall be offered when deemed appropriate.

The auditor interviewed mental health staff who confirmed mental health evaluations are performed on all inmates referred by staff screenings. The facility’s designated PREA Compliance Manager confirmed the screening process and investigation process in the facility’s database would require these referrals, once noted in the system. The auditor witnessed this application on inmate’s files in the database who had reported a history of sexual abuse. The designated PCM verified an inmate who perpetrated sexual abuse at the facility would also be referred to mental health and documented in the database, as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
### Sexual abuse incident reviews

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Plane/Henley Complex Investigation Team Roster and Rank (03/01/2022)
- Agency Response to PAQ

**Interviews:**

- Warden
- Assistant Warden
- Designated PREA Compliance Manager (Unit Safe Prison/PREA Manager)
- Incident Review Team

**Site Review Observations:**

- PREA case files
- SAFE Prisons/PREA Automated Network System (SPPANS)

**Findings (by provision):**

#### 115.86(a)
Provision 115.86(a) states, "The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded."

TDCJ Safe Prisons/PREA Plan (p. 32) states an administrative review shall be completed for all alleged sexual abuse and staff sexual harassment incidents, unless determined to be unfounded.

The facility reported in the PAQ 24 criminal and/or administrative investigations of alleged sexual abuse were completed at the facility in the past 12 months, excluding only unfounded incidents. The auditor reviewed the facility’s PREA case files and confirmed sexual abuse incident reviews had occurred for the facility’s cases as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

#### 115.86(b)
Provision 115.86(b) states, "Such review shall ordinarily occur within 30 days of the conclusion of the investigation."

TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 8) states the Administrative Incident Review shall be forwarded to the appropriate regional director, PFCMOD deputy director of operations, or department head no later than 10 working days.

The auditor reviewed the Incident Review Team documentation onsite and confirmed the incident reviews had been completed within 30 days of the conclusion of the investigation, as required by this provision.

The auditor interviewed the facility’s Warden, designated PREA Compliance Manager and Incident Review Team staff who confirmed the facility staff meet regularly, at least monthly, to discuss any PREA investigation cases, to include sexual abuse cases that are not unfounded.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

#### 115.86(c)
Provision 115.86(c) states, "The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners."

TDCJ Safe Prisons/PREA Plan (p. 32) states the unit warden shall obtain input from security supervisors, investigators, and medical or mental health practitioners when completing the review. TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 7-8) states after reporting a
serious or unusual incident, the warden or supervisor shall conduct a prompt, thorough investigation, and complete an Administrative Incident Review.

The auditor reviewed the documentation from the facility’s incident reviews and found staff to include upper-level supervisors and classifications supervisors had been utilized during the reviews as required by this provision.

The facility’s Warden informed the auditor the review team consists of upper-Chain of Command Staff and classifications staff, and other supervisors, as available and/or necessary. The auditor interviewed several other staff from the rank of Captain to Assistant Warden who confirmed the incident review team’s members are supervisors assigned to various areas of the facility. Staff also informed the auditor any additional medical or mental health input would involve those supervisors, as necessary.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.86 (d) Provision 115.12(b) states, “The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.”

TDCJ Safe Prisons/PREA Plan (p. 32) states the review shall be conducted in accordance with AD-02.15. TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 7-8) states the review shall include a consideration of the factors that are provided by the investigations team.

The auditor reviewed the 24 instances in which an incident review was conducted at the facility in the last 12 months. All listed and answered the following questions:

- Team Members of the incident review
- Summary of the incident
- Policy and Practice, specifically if there needs to be a change in policy, if staff understood the policy, if staff need training on the policy, does practice match policy, are corrections best-practices being utilized (1)
- Motivation for the incident, specifically if LGBTI, gang affiliation, culture/race/ethnicity/gender is a factor, staff culture, need for training and/or disciplinary (2)
- Physical Plant, specifically if there are blind spots, key control issues, vulnerability areas, staff/offender allowance in unauthorized areas, procedures to ensure these areas are kept secure (3)
- Supervision, specifically if staffing is sufficient, post assignment changes, need for additional technology, or, if present, was technology working (4-5)
- Other factors
- Overall recommendations and findings of the team (6)

In 11 of the reviews, the facility requested video monitoring be installed or recording features be made available to assist in investigation and possible prevention of future incidents.

The auditor interviewed the facility’s Warden, designated PREA Compliance Manager and other members of the facility’s Incident Review Team. All confirmed the questions required by this provision are investigated, reviewed, and documented.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.86 (e) Provision 115.86(e) states, “The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.”

TDCJ Safe Prisons/PREA Plan (p. 32) states the unit shall implement recommendations that result from the review or document the reasons for not doing so. TDCJ Administrative Directive AD-02.15: Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents (p. 9) states all Administrative Incident Reviews containing recommendations or corrective action require a written 90-day follow-up report that is submitted by the regional director, PFCMOD deputy director of operations or department head to the deputy director for Prison and Jail Operations, PFCMOD deputy division director or the appropriate division director for review.
The auditor reviewed the facility’s Incident Review Team findings for 11 cases in which video monitoring upgrades and/or repairs had been requested. The auditor learned the facility’s Warden and Assistant Warden had very recently been assigned to the facility and had not participated in many of the incident reviews the auditor had been provided. Both staff confirmed additional requests for video monitoring upgrades/repairs had been made to agency leadership frequently since their arrival, but that funding had inhibited the enhancements in some instances, and delayed delivery of equipment parts had contributed to existing equipment repair issues in other instances.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
115.87  Data collection

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Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- Department of Justice SSV2: Survey of Sexual Victimization, State Prisons Systems, Summary Form (2018-2020)
- TDCJ Safe Prisons/PREA Operations Manual 08.01: Unit Investigation Team Meeting Flow Sheet, Attachment S (02/2020)
- TDCJ Safe Prisons/PREA Program Annual Report 2020
- Agency Response to PAQ

Interviews:

PREA Coordinator (PREA Ombudsman)

Site Review Observations:

PREA case files
SAFE Prisons/PREA Automated Network System (SPPANS)

Findings (by provision):

115.87(a) Provision 115.87(a) states, “The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.”

TDCJ Safe Prisons/PREA Plan (p. 36) states accurate, uniform data shall be collected for every sexual abuse alleged to have occurred at a TDCJ operated facility using a standardized instrument and set of definitions. TDCJ Board Policy BP-02.09: Prison Rape Elimination Act Ombudsman Policy (p. 5) states the PREA ombudsman’s responsibilities include collecting statistics regarding allegations of offender sexual abuse and sexual harassment from each correctional facility to comply with PREA Standards.

The auditor was provided examples of the agency’s SAFE Prisons/PREA Automated Network System (SPPANS) which is the collection system for the facility’s incidents. The instrument is standardized for every facility in the agency’s control. The instrument includes the data necessary to answer all questions from the most recent version of Survey of Sexual Violence conducted by the Department of Justice.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.87(b) Provision 115.87(b) states, “The agency shall aggregate the incident-based sexual abuse data at least annually.”

TDCJ Safe Prisons/PREA Plan (p. 36) states incident-based sexual abuse data shall be aggregated at least annually. TDCJ Safe Prisons/PREA Operations Manual 08.01: Monthly Safe Prisons/PREA Report (p. 1) states each month the USPPM shall compile statistical data collected. TDCJ Safe Prisons/PREA Operations Manual 01.01: Safe Prisons/PREA Management Office (p. 1) states the SPPMO shall compile and provide a monthly report to the Correctional Institutions Divisions directors utilizing the information obtained from the Monthly Safe Prisons/PREA Report to analyze and evaluate trends in sexual abuse, sexual harassment, and extortion. The document also states the SPPMO shall prepare technical reports concerning identified trends to assist agency administration in making decisions related to unit operations.

The auditor interviewed the PREA Coordinator informally who described that SPPANS pulls all information into one location for the agency to use in making individual facility reports annually. The auditor reviewed the aggregated annual data for the facility that was provided during the PAQ, and which was collected as described by the PREA Coordinator.

The auditor reviewed the TDCJ Safe Prisons/PREA Program Annual Report 2020 (p. 28-44) on the agency’s website which listed the aggregated data as required by this provision. The website lists similar reports for previous years back to 2009.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.
115.87(c) Provision 115.87(c) states, “The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.”

TDCJ Safe Prisons/PREA Plan (p. 36) states the incident-based data collected shall include, at a minimum, information necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. TDCJ Board Policy BP-02.09: Prison Rape Elimination Act Ombudsman Policy (p. 5) states the PREA ombudsman’s responsibilities include collecting statistics regarding allegations of offender sexual abuse and sexual harassment from each correctional facility to comply with PREA Standards.

The Survey of Sexual Violence conducted by the Department of Justice lists each category of sexual violence as defined under the Prison Rape Elimination Act of 2003. The survey requests the following: if the agency records all nonconsensual inmate-on-inmate sex acts or just substantiated cases; the number of nonconsensual inmate-on-inmate sex acts, nonconsensual inmate-on-inmate abusive contacts, staff sexual harassment and staff sexual misconducts are reported for the year; and, of those reported, how many were substantiated, unsubstantiated, unfounded, or ongoing for each category.

The auditor reviewed the TDCJ Safe Prisons/PREA Program Annual Report 2020 (p. 28-44) which specifies each case investigated by the agency and goes into detail for each unit under the agency’s control. The report covers all areas of the SSV, as required by this provision.

115.87(d) Provision 115.87(d) states, “The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.”

TDCJ Safe Prisons/PREA Plan (p. 36) states all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews shall be maintained, reviewed, and collected as needed to complete the SSV. TDCJ Safe Prisons/PREA Operations Manual 08.01: Monthly Safe Prisons/PREA Report (p. 1-2) states each month the USPPM shall coordinate with the unit Major to schedule a meeting as soon as possible following the last day of the month to discuss statistics related to the previous months Safe Prisons/PREA Activity. The document also states the activity will be compared on a month-to-month basis, and appropriate actions will be discussed.

The auditor witnessed the agency’s SAFE Prisons/PREA Automated Network System (SPPANS) retention areas for past investigation files and incident reviews and other relevant documentation to confirm the facility maintains these items as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.87(e) Provision 115.87(e) states, “The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.”

TDCJ Safe Prisons/PREA Plan (p. 36) states accurate, uniform data shall be collected for every sexual abuse alleged to have occurred at a TDCJ operated facility using a standardized instrument and set of definitions. TDCJ Board Policy BP-02.09: Prison Rape Elimination Act Ombudsman Policy (p. 5) states the PREA ombudsman’s responsibilities include collecting statistics regarding allegations of offender sexual abuse and sexual harassment from each correctional facility to comply with PREA Standards.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.87(f) Provision 115.87(f) states, “Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”

TDCJ Safe Prisons/PREA Plan (p. 36) states once requested, the TDCJ shall provide all relevant data from the previous calendar year to the Department of Justice. The facility provided the auditor with the SSV-2 forms from the years 2017-2020 as evidence for compliance with this standard. The forms were completed in their entirety.

The auditor’s informal conversation with the PREA Coordinator confirmed the agency has been asked to complete the SSVI each year since the agency’s compliance with the PREA Standards. The surveys from 2018-2020 were provided by the agency for review in the PAQ.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
### 115.88 Data review for corrective action

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Safe Prisons/PREA Program Annual Report 2020
- Website: https://www.tdcj.texas.gov/tbcj/prea.html
- Agency Response to PAQ

**Interviews:**

- Agency Head Representative
- PREA Coordinator (PREA Ombudsman)

**Findings (by provision):**

#### 115.88(a)
Provision 115.88(a) states, “The agency shall review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.”

TDCJ Safe Prisons/PREA Plan (p. 36) states TDCJ shall review data [pursuant to § 115.87] in order to assess and improve the effectiveness of the sexual abuse prevention, detection, and response policies, procedures, and training by identifying problematic areas, taking corrective action on an ongoing basis, and preparing an annual report of findings and corrective actions for each unit, as well as TDCJ as a whole, in collaboration with the OIG and PREA Ombudsman.

The auditor was provided the TDCJ Safe Prisons/PREA Program Annual Report 2020. The report contained a vast comparison of the current year’s data and corrective actions from years prior giving extensive information on how the agency has improved its effectiveness in its sexual abuse prevention, detection, and response policies, as required by this provision. The report gave a comprehensive rendering of how the agency has improved its operations where needed and expanded upon successful practices so that the intent of the PREA Standards may be achieved by the Texas Department of Criminal Justice.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative and the agency’s PREA Coordinator. The representative stated any policy changes will occur if indicated in the reviews to include increasing staff and surveillance equipment, as needed. The representative emphasized the TDCJ facilities have been able to remain safe, even during the COVID-19 pandemic, and the central office staff have been present by “walking and talking” at the institutional level. The PREA Coordinator confirmed the wardens and the SPPMO are responsible for generating the statistics for these reports. They are reviewed by the Executive Services Division, which generates recommendations for policy, procedures, and staffing changes. The PREA Coordinator states they are involved with any issues related to a specific PREA Standard and will recommend policy, practice and/or training changes, as necessary, and that any corrective action is taken immediately, when identified.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

#### 115.88(b)
Provision 115.88(b) states, “Such report shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.”

TDCJ Safe Prisons/PREA Plan (p. 36) states the annual report shall include a comparison of the data and corrective actions from the current year with those from prior years and shall provide an assessment of the progress made in addressing sexual abuse.

The auditor was provided the TDCJ Safe Prisons/PREA Program Annual Report 2020. The report contained a comparison of the current year’s data and corrective actions from years prior giving extensive information on inmate education improvements, staff training improvements, facility and monitoring upgrades and many other factors that would contribute to an agency’s ability to producing and advancing a sexually safe environment and addressing sexual abuse for its persons in custody.

The auditor was provided a telephone interview with the agency’s PREA Coordinator who confirmed the annual report is
prepared as required by this provision.

115.88(c) Provision 115.88(c) states, “The agency’s report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.”

TDCJ Safe Prisons/PREA Plan (p. 36) states annual reports shall be approved by the TDCJ Executive Director and made readily available to the public through the TDCJ website. The auditor was provided the TDCJ Safe Prisons/PREA Program Annual Report, years 2009-2020. Each was accessed by the auditor and made available through the agency’s website as reviewed by the auditor on 06/01/2022.

The auditor was provided a telephone interview with a TDCJ Agency Head Representative. The representative stated they approve all annual written reports pursuant to this standard.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.88(d) Provision 115.88(d) states, “The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.”

TDCJ Safe Prisons/PREA Plan (p. 37) states personal identifiers and sensitive information shall be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a unit, while maintaining the nature of the material. The auditor was provided the TDCJ Safe Prisons/PREA Program Annual Report 2020. The report excluded information as required by this provision.

The auditor was provided a telephone interview with the PREA Coordinator who confirmed the data in the annual report has redacted information; no personal identifiable data is included in the report as required by this provision.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
115.89 Data storage, publication, and destruction

| Auditor Overall Determination: | Meets Standard |

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

- TDCJ Safe Prisons/PREA Plan (02/2019)
- TDCJ Executive Directive ED-02.29 (rev. 1): Records Management (05/30/2014)
- TDCJ Records Retention Schedule (09/2020)
- TDCJ Safe Prisons/PREA Program Annual Report 2020
- Website: https://www.tdcj.texas.gov/tbjc/prea.html
- Agency Response to PAQ

**Interviews:**

PREA Coordinator (PREA Ombudsman)

**Site Review Observations:**

- PREA case files
- SAFE Prisons/PREA Automated Network System (SPPANS)
- Informal interviews with staff

**Findings (by provision):**

**115.89(a)** Provision 115.89(a) states, “The agency shall ensure that data collected pursuant to § 115.87 are securely retained.”

TDCJ Safe Prisons/PREA Plan (p. 37) states all data collected pursuant to § 115.87 shall be securely retained.

The auditor reviewed examples of the SAFE Prisons/PREA Automated Network System (SPPANS), and physical files and storage of the information used in the facility’s PREA data collections. It was explained to the auditor that all users in the SPPANS have specific access granted, and this was observed by the auditor when different levels of staff were able to show the access they had in the system, based on their roles and authority.

The auditor was provided a telephone interview with the PREA Coordinator who confirmed the data collected goes into an automated system that is securely retained as required by this provision. The auditor also informally interviewed staff during the site review when witnessing physical files of this documentation. The information is securely retained and access to the area is monitored and only authorized by higher-command staff.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.89(b)** Provision 115.89(b) states, “The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.”

TDCJ Safe Prisons/PREA Plan (p. 37) all aggregated sexual abuse data, from TDCJ operated facilities, including privately contracted facilities, shall be readily available to the public at least annually through a website or other means. The auditor was provided the TDCJ Safe Prisons/PREA Program Annual Report 2020; the report was able to be accessed by the auditor on 04/10/2022, through the agency’s website.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.89(c)** Provision 115.89(c) states, “Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.”

TDCJ Safe Prisons/PREA Plan (p. 37) states personal identifiers and sensitive information shall be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a unit, while maintaining the nature of the material. The auditor did not see personal identifiers in the information that was released publicly, as required by this provision.
Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.89(d)** Provision 115.89(d) states, “The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.”

TDCJ Safe Prisons/PREA Plan (p. 37) states all sexual abuse data collected shall be maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The TDCJ Records Retention Schedule (p. 31) shows all sexual abuse reports and annual PREA reports are held for 10 years. The schedule also shows (p. 35) all sexual abuse investigation files are held permanently. The auditor confirmed onsite that the physical files for the facility’s reports had been held since the facility began practicing the PREA Standards.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**Corrective Action:**

The auditor recommends no corrective action.
**Frequency and scope of audits**

<table>
<thead>
<tr>
<th>115.401</th>
<th>Frequency and scope of audits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auditor Overall Determination:</td>
<td>Meets Standard</td>
</tr>
</tbody>
</table>

**Auditor Discussion**

**Documents Reviewed:** (Policies, directives, forms, files, records, etc.)

PREA Audit Final Report for TDCJ Plane/Henley Complex (06/12/2019)

Agency response to PAQ

Findings (by provision):

**115.401 (a)** Provision 115.401(a) states, “During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.”

The facility received a PREA Compliance Audit report for the previous PREA Audit Cycle on 06/12/2019. The facility exceeded 3 standards, met 42 standards, and did not meet 0 standards in the previous audit.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.401 (b)** Provision 115.401(b) states, “During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.”

This is the third year of the third audit cycle. The agency is following an audit cycle that ensures at least one-third of each facility operated by the agency is audited.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.401 (h)** Provision 115.401(h) states, “The auditor shall have access to, and shall observe, all areas of the audited facilities.”

The auditor was given access to, and was able to observe, all areas of the audited facility. The Warden and staff assisting with the audit while onsite were extremely helpful and willing to provide access to any additional area and/or documentation needed. The auditor learned the facility leadership was recently assigned to the unit, and the professionalism the leadership team required of their staff was evident during the site review when the auditor requested access to all areas of the facility.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.401 (i)** Provision 115.401(i) states, “The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).”

All staff at the facility were extremely helpful in obtaining any necessary information, including electronically stored information, while onsite. In addition, the agency staff provided well-organized and thorough information necessary for the auditor to conduct the audit and when additional information was necessary, the facility’s designated PREA Compliance Manager, Administrative Lieutenant assisting the PCM and regional PREA staff were able to provide all documents requested in a timely manner.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

**115.401 (m)** Provision 115.401(m) states, “The auditor shall be permitted to conduct private interviews with inmates, residents, and detainees.”

Due to the COVID-19 pandemic, in an effort to minimize face-to-face interactions, the auditor opted to conduct phone interviews with specialized staff during the pre-onsite phase, as outlined by the PREA Resource Center’s Guidance on Virtual PREA Audits. The auditor was able to schedule and complete interviews with agency leadership and the designated PREA Compliance staff prior to the onsite audit phase.

During the onsite audit, the auditor’s interviews were conducted in a supervisor’s office or specialized staff areas. All areas were away from inmate housing areas. The interview areas allowed discrete conversations to be conducted. Staff did not
interfere with the interviewing of any inmates or staff and the auditor believes both parties were at ease with disclosing information to the auditor.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

115.401 (n) Provision 115.401(n) states, “Inmates, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.”

The auditor did not receive any pre-onsite audit correspondence from inmates of the facility, however, the auditor confirmed the Audit Notices were posted in advance of the audit, as required by the PREA Auditor’s Handbook. The auditor interviewed mailroom staff who confirmed any correspondence to the auditor would be treated as legal counsel correspondence. The auditor did not receive inmate correspondence after the onsite audit.

Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.

Corrective Action:

The auditor recommends no corrective action.
<table>
<thead>
<tr>
<th>115.403</th>
<th>Audit contents and findings</th>
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<tr>
<td></td>
<td>Auditor Overall Determination: Meets Standard</td>
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<td>Auditor Discussion</td>
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<tr>
<td></td>
<td>Findings (by provision):</td>
</tr>
<tr>
<td>115.403 (f)</td>
<td>Provision 115.401(f) states, “The agency shall ensure that the auditor’s final report is published on the agency’s website if it has one or is otherwise made readily available to the public.”</td>
</tr>
<tr>
<td></td>
<td>The facility was previously audited in the second audit cycle and has published the PREA Audit Report from 06/12/2019 on its public website.</td>
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<tr>
<td></td>
<td>Based upon review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this provision.</td>
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<td>Corrective Action:</td>
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<tr>
<td></td>
<td>The auditor recommends no corrective action.</td>
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<tr>
<td>Appendix: Provision Findings</td>
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<tr>
<td><strong>115.11 (a)</strong> Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</td>
<td></td>
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<tr>
<td>Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td><strong>115.11 (b)</strong> Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</td>
<td></td>
</tr>
<tr>
<td>Has the agency employed or designated an agency-wide PREA Coordinator?</td>
<td>yes</td>
</tr>
<tr>
<td>Is the PREA Coordinator position in the upper-level of the agency hierarchy?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?</td>
<td>yes</td>
</tr>
<tr>
<td><strong>115.11 (c)</strong> Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</td>
<td></td>
</tr>
<tr>
<td>If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)</td>
<td>yes</td>
</tr>
<tr>
<td><strong>115.12 (a)</strong> Contracting with other entities for the confinement of inmates</td>
<td></td>
</tr>
<tr>
<td>If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity’s obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)</td>
<td>yes</td>
</tr>
<tr>
<td><strong>115.12 (b)</strong> Contracting with other entities for the confinement of inmates</td>
<td></td>
</tr>
<tr>
<td>Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.13 (a)</td>
<td>Supervision and monitoring</td>
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</tr>
<tr>
<td>Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including “blind-spots” or areas where staff or inmates may be isolated)?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?</td>
<td>yes</td>
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<thead>
<tr>
<th>115.13 (b)</th>
<th>Supervision and monitoring</th>
</tr>
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<tbody>
<tr>
<td>In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)</td>
<td>yes</td>
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<thead>
<tr>
<th>115.13 (c)</th>
<th>Supervision and monitoring</th>
</tr>
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<tbody>
<tr>
<td>In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?</td>
<td>yes</td>
</tr>
<tr>
<td>In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?</td>
<td>yes</td>
</tr>
<tr>
<td>In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?</td>
<td>yes</td>
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<tr>
<td>Section</td>
<td>Description</td>
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<tr>
<td>115.13 (d)</td>
<td>Supervision and monitoring</td>
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<tr>
<td>115.14 (a)</td>
<td>Youthful inmates</td>
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<tr>
<td>115.14 (b)</td>
<td>Youthful inmates</td>
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<tr>
<td>115.14 (c)</td>
<td>Youthful inmates</td>
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<tr>
<td>115.15 (a)</td>
<td>Limits to cross-gender viewing and searches</td>
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<tr>
<td>115.15 (b)</td>
<td>Limits to cross-gender viewing and searches</td>
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<td></td>
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<tr>
<td>115.15 (c)</td>
<td>Limits to cross-gender viewing and searches</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>115.15 (d)</td>
<td>Limits to cross-gender viewing and searches</td>
</tr>
<tr>
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<tr>
<td>Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?</td>
<td>yes</td>
</tr>
<tr>
<td>115.15 (e)</td>
<td>Limits to cross-gender viewing and searches</td>
</tr>
<tr>
<td>Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate’s genital status?</td>
<td>yes</td>
</tr>
<tr>
<td>If an inmate’s genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?</td>
<td>yes</td>
</tr>
<tr>
<td>115.15 (f)</td>
<td>Limits to cross-gender viewing and searches</td>
</tr>
<tr>
<td>Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?</td>
<td>yes</td>
</tr>
<tr>
<td>115.16 (a)</td>
<td>Inmates with disabilities and inmates who are limited English proficient</td>
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<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if &quot;other,&quot; please explain in overall determination notes.)</td>
<td>yes</td>
</tr>
<tr>
<td>Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?</td>
<td>yes</td>
</tr>
<tr>
<td>Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.16 (b)</th>
<th>Inmates with disabilities and inmates who are limited English proficient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?</td>
<td>yes</td>
</tr>
<tr>
<td>Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?</td>
<td>yes</td>
</tr>
</tbody>
</table>
### 115.16 (c) Inmates with disabilities and inmates who are limited English proficient

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under §115.64, or the investigation of the inmate’s allegations?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.17 (a) Hiring and promotion decisions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.17 (b) Hiring and promotion decisions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.17 (c) Hiring and promotion decisions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?</td>
<td>yes</td>
</tr>
<tr>
<td>Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.17 (d) Hiring and promotion decisions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.17 (e) Hiring and promotion decisions

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?</td>
<td>yes</td>
</tr>
<tr>
<td>115.17 (f)</td>
<td>Hiring and promotion decisions</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.17 (g)</th>
<th>Hiring and promotion decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.17 (h)</th>
<th>Hiring and promotion decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.18 (a)</th>
<th>Upgrades to facilities and technologies</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)</td>
<td>na</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.18 (b)</th>
<th>Upgrades to facilities and technologies</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)</td>
<td>na</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.21 (a)</th>
<th>Evidence protocol and forensic medical examinations</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.21 (b)</th>
<th>Evidence protocol and forensic medical examinations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)</td>
<td>yes</td>
</tr>
<tr>
<td>Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, &quot;A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,&quot; or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)</td>
<td>yes</td>
</tr>
</tbody>
</table>
### Evidence protocol and forensic medical examinations

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.21 (c)</td>
<td>Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (d)</td>
<td>Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (e)</td>
<td>If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (f)</td>
<td>Has the agency documented its efforts to provide SAFEs or SANEs?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (d)</td>
<td>Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (e)</td>
<td>If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (f)</td>
<td>Has the agency documented its efforts to secure services from rape crisis centers?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (e)</td>
<td>As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (f)</td>
<td>As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?</td>
<td>yes</td>
</tr>
<tr>
<td>115.21 (h)</td>
<td>If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.22 (a)</td>
<td>If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

### Policies to ensure referrals of allegations for investigations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?</td>
<td>yes</td>
</tr>
</tbody>
</table>
### 115.22 (b) Policies to ensure referrals of allegations for investigations

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

### 115.22 (c) Policies to ensure referrals of allegations for investigations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.31 (a) Employee training

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.31 (b) Employee training

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is such training tailored to the gender of the inmates at the employee’s facility?</td>
<td>yes</td>
</tr>
<tr>
<td>Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?</td>
<td>yes</td>
</tr>
</tbody>
</table>
### Employee training

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.31 (c)</td>
<td>Have all current employees who may have contact with inmates received such training?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency’s current sexual abuse and sexual harassment policies and procedures?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?</td>
<td>yes</td>
</tr>
<tr>
<td>115.31 (d)</td>
<td>Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### Volunteer and contractor training

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.32 (a)</td>
<td>Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures?</td>
<td>yes</td>
</tr>
<tr>
<td>115.32 (b)</td>
<td>Have all volunteers and contractors who have contact with inmates been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?</td>
<td>yes</td>
</tr>
<tr>
<td>115.32 (c)</td>
<td>Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### Inmate education

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Answer</th>
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</thead>
<tbody>
<tr>
<td>115.33 (a)</td>
<td>During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>115.33 (b)</td>
<td>Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?</td>
<td>yes</td>
</tr>
<tr>
<td>115.33 (c)</td>
<td>Have all inmates received the comprehensive education referenced in 115.33(b)?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility?</td>
<td>yes</td>
</tr>
<tr>
<td>Section</td>
<td>Topic</td>
<td>Question</td>
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</tr>
<tr>
<td>115.33 (d)</td>
<td>Inmate education</td>
<td>Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?</td>
</tr>
<tr>
<td>115.33 (e)</td>
<td>Inmate education</td>
<td>Does the agency maintain documentation of inmate participation in these education sessions?</td>
</tr>
<tr>
<td>115.33 (f)</td>
<td>Inmate education</td>
<td>In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?</td>
</tr>
<tr>
<td>115.34 (a)</td>
<td>Specialized training: Investigations</td>
<td>In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td>115.34 (b)</td>
<td>Specialized training: Investigations</td>
<td>Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td>115.34 (c)</td>
<td>Specialized training: Investigations</td>
<td>Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</td>
</tr>
<tr>
<td>Section</td>
<td>Topic</td>
<td>Question</td>
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</tr>
<tr>
<td>115.35 (a)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)</td>
</tr>
<tr>
<td>115.35 (a)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)</td>
</tr>
<tr>
<td>115.35 (a)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)</td>
</tr>
<tr>
<td>115.35 (a)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)</td>
</tr>
<tr>
<td>115.35 (b)</td>
<td>Specialized training: Medical and mental health care</td>
<td>If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)</td>
</tr>
<tr>
<td>115.35 (c)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)</td>
</tr>
<tr>
<td>115.35 (d)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)</td>
</tr>
<tr>
<td>115.35 (d)</td>
<td>Specialized training: Medical and mental health care</td>
<td>Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)</td>
</tr>
<tr>
<td>115.41 (a)</td>
<td>Screening for risk of victimization and abusiveness</td>
<td>Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?</td>
</tr>
<tr>
<td>115.41 (a)</td>
<td>Screening for risk of victimization and abusiveness</td>
<td>Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?</td>
</tr>
<tr>
<td>115.41 (b)</td>
<td>Screening for risk of victimization and abusiveness</td>
<td>Do intake screenings ordinarily take place within 72 hours of arrival at the facility?</td>
</tr>
<tr>
<td>115.41 (c)</td>
<td>Screening for risk of victimization and abusiveness</td>
<td>Are all PREA screening assessments conducted using an objective screening instrument?</td>
</tr>
</tbody>
</table>
### 115.41 (d) Screening for risk of victimization and abusiveness

<table>
<thead>
<tr>
<th>Question</th>
<th>YES/NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener’s perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?</td>
<td>no</td>
</tr>
</tbody>
</table>

### 115.41 (e) Screening for risk of victimization and abusiveness

<table>
<thead>
<tr>
<th>Question</th>
<th>YES/NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?</td>
<td>yes</td>
</tr>
<tr>
<td>In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.41 (f) Screening for risk of victimization and abusiveness

<table>
<thead>
<tr>
<th>Question</th>
<th>YES/NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?</td>
<td>yes</td>
</tr>
<tr>
<td>115.41 (g)</td>
<td>Screening for risk of victimization and abusiveness</td>
</tr>
<tr>
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<tr>
<td>Does the facility reassess an inmate’s risk level when warranted due to a referral?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility reassess an inmate’s risk level when warranted due to a request?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility reassess an inmate’s risk level when warranted due to an incident of sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility reassess an inmate’s risk level when warranted due to receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness?</td>
<td>yes</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>115.41 (h)</th>
<th>Screening for risk of victimization and abusiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?</td>
<td>yes</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>115.41 (i)</th>
<th>Screening for risk of victimization and abusiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.42 (a)</th>
<th>Use of screening information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?</td>
<td>yes</td>
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<table>
<thead>
<tr>
<th>115.42 (b)</th>
<th>Use of screening information</th>
</tr>
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<tbody>
<tr>
<td>Does the agency make individualized determinations about how to ensure the safety of each inmate?</td>
<td>yes</td>
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<table>
<thead>
<tr>
<th>115.42 (c)</th>
<th>Use of screening information</th>
</tr>
</thead>
<tbody>
<tr>
<td>When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?</td>
<td>yes</td>
</tr>
<tr>
<td>When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems?</td>
<td>yes</td>
</tr>
<tr>
<td>115.42 (d)</td>
<td>Use of screening information</td>
</tr>
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</tr>
<tr>
<td>Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?</td>
<td>yes</td>
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<thead>
<tr>
<th>115.42 (e)</th>
<th>Use of screening information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are each transgender or intersex inmate’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.42 (f)</th>
<th>Use of screening information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are transgender and intersex inmates given the opportunity to shower separately from other inmates?</td>
<td>yes</td>
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<thead>
<tr>
<th>115.42 (g)</th>
<th>Use of screening information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)</td>
<td>yes</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>115.43 (a)</th>
<th>Protective Custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?</td>
<td>yes</td>
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<tbody>
<tr>
<td>If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?</td>
<td>yes</td>
</tr>
<tr>
<td>115.43 (b)</td>
<td>Protective Custody</td>
</tr>
<tr>
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</tr>
<tr>
<td>Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?</td>
<td>yes</td>
</tr>
<tr>
<td>Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?</td>
<td>yes</td>
</tr>
<tr>
<td>Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?</td>
<td>yes</td>
</tr>
<tr>
<td>Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?</td>
<td>yes</td>
</tr>
<tr>
<td>If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)</td>
<td>yes</td>
</tr>
<tr>
<td>If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)</td>
<td>yes</td>
</tr>
<tr>
<td>If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)</td>
<td>yes</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>115.43 (c)</th>
<th>Protective Custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?</td>
<td>yes</td>
</tr>
<tr>
<td>Does such an assignment not ordinarily exceed a period of 30 days?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.43 (d)</th>
<th>Protective Custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?</td>
<td>yes</td>
</tr>
<tr>
<td>If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.43 (e)</th>
<th>Protective Custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.51 (a)</th>
<th>Inmate reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?</td>
<td>yes</td>
</tr>
<tr>
<td>115.51 (b)</td>
<td>Inmate reporting</td>
</tr>
<tr>
<td>------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?</td>
<td>yes</td>
</tr>
<tr>
<td>Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?</td>
<td>yes</td>
</tr>
<tr>
<td>Does that private entity or office allow the inmate to remain anonymous upon request?</td>
<td>yes</td>
</tr>
<tr>
<td>Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)</td>
<td>na</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.51 (c)</th>
<th>Inmate reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?</td>
<td>yes</td>
</tr>
<tr>
<td>Does staff promptly document any verbal reports of sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.51 (d)</th>
<th>Inmate reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.52 (a)</th>
<th>Exhaustion of administrative remedies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.</td>
<td>no</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.52 (b)</th>
<th>Exhaustion of administrative remedies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.52 (c)</th>
<th>Exhaustion of administrative remedies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
</tbody>
</table>
### 115.52 (d) Exhaustion of administrative remedies

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.52 (e) Exhaustion of administrative remedies

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
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</table>

### 115.52 (f) Exhaustion of administrative remedies

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</td>
<td>yes</td>
</tr>
<tr>
<td>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

### 115.52 (g) Exhaustion of administrative remedies

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.53 (a)</td>
<td>Inmate access to outside confidential support services</td>
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</tr>
<tr>
<td>Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)</td>
<td>na</td>
</tr>
<tr>
<td>Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?</td>
<td>yes</td>
</tr>
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<table>
<thead>
<tr>
<th>115.53 (b)</th>
<th>Inmate access to outside confidential support services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?</td>
<td>yes</td>
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<table>
<thead>
<tr>
<th>115.53 (c)</th>
<th>Inmate access to outside confidential support services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.54 (a)</th>
<th>Third-party reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.61 (a)</th>
<th>Staff and agency reporting duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.61 (b)</th>
<th>Staff and agency reporting duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?</td>
<td>yes</td>
</tr>
<tr>
<td>115.61 (c)</td>
<td>Staff and agency reporting duties</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?</td>
<td>yes</td>
</tr>
<tr>
<td>Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.61 (d)</th>
<th>Staff and agency reporting duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.61 (e)</th>
<th>Staff and agency reporting duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?</td>
<td>yes</td>
</tr>
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<table>
<thead>
<tr>
<th>115.62 (a)</th>
<th>Agency protection duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.63 (a)</th>
<th>Reporting to other confinement facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?</td>
<td>yes</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>115.63 (b)</th>
<th>Reporting to other confinement facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?</td>
<td>yes</td>
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</table>

<table>
<thead>
<tr>
<th>115.63 (c)</th>
<th>Reporting to other confinement facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency document that it has provided such notification?</td>
<td>yes</td>
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<thead>
<tr>
<th>115.63 (d)</th>
<th>Reporting to other confinement facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?</td>
<td>yes</td>
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<table>
<thead>
<tr>
<th>115.64 (a)</th>
<th>Staff first responder duties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?</td>
<td>yes</td>
</tr>
<tr>
<td>Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?</td>
<td>yes</td>
</tr>
<tr>
<td>Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?</td>
<td>yes</td>
</tr>
<tr>
<td>Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?</td>
<td>yes</td>
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<tr>
<td>Section</td>
<td>Description</td>
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<td>---------</td>
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</tr>
<tr>
<td>115.64 (b)</td>
<td>Staff first responder duties</td>
</tr>
<tr>
<td>115.65 (a)</td>
<td>Coordinated response</td>
</tr>
<tr>
<td>115.66 (a)</td>
<td>Preservation of ability to protect inmates from contact with abusers</td>
</tr>
<tr>
<td>115.67 (a)</td>
<td>Agency protection against retaliation</td>
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<tr>
<td>115.67 (b)</td>
<td>Agency protection against retaliation</td>
</tr>
<tr>
<td>115.67 (c)</td>
<td>Agency protection against retaliation</td>
</tr>
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</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?</td>
<td>yes</td>
</tr>
<tr>
<td>Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.67 (d)</th>
<th>Agency protection against retaliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the case of inmates, does such monitoring also include periodic status checks?</td>
<td>yes</td>
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<thead>
<tr>
<th>115.67 (e)</th>
<th>Agency protection against retaliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?</td>
<td>yes</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>115.68 (a)</th>
<th>Post-allegation protective custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?</td>
<td>yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.71 (a)</th>
<th>Criminal and administrative agency investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)</td>
<td>yes</td>
</tr>
<tr>
<td>Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)</td>
<td>yes</td>
</tr>
<tr>
<td>115.71 (b)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (c)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (d)</td>
<td>Criminal and administrative agency investigations</td>
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<td>115.71 (e)</td>
<td>Criminal and administrative agency investigations</td>
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<td>115.71 (f)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (g)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (h)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (i)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (j)</td>
<td>Criminal and administrative agency investigations</td>
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<tr>
<td>115.71 (l)</td>
<td>Criminal and administrative agency investigations</td>
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</tr>
<tr>
<td>115.72 (a)</td>
<td>Evidentiary standard for administrative investigations</td>
</tr>
<tr>
<td>115.73 (a)</td>
<td>Reporting to inmates</td>
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<tr>
<td>115.73 (b)</td>
<td>Reporting to inmates</td>
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<tr>
<td>115.73 (c)</td>
<td>Reporting to inmates</td>
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<tr>
<td>115.73 (d)</td>
<td>Reporting to inmates</td>
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<tr>
<td>115.73 (e)</td>
<td>Reporting to inmates</td>
</tr>
<tr>
<td>115.76 (a)</td>
<td>Disciplinary sanctions for staff</td>
</tr>
<tr>
<td>115.76 (b)</td>
<td>Disciplinary sanctions for staff</td>
</tr>
<tr>
<td>Code</td>
<td>Section</td>
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<tr>
<td>115.76 (c)</td>
<td>Disciplinary sanctions for staff</td>
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<tr>
<td>115.76 (d)</td>
<td>Disciplinary sanctions for staff</td>
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<tr>
<td>115.77 (a)</td>
<td>Corrective action for contractors and volunteers</td>
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<tr>
<td>115.77 (b)</td>
<td>Corrective action for contractors and volunteers</td>
</tr>
<tr>
<td>115.78 (a)</td>
<td>Disciplinary sanctions for inmates</td>
</tr>
<tr>
<td>115.78 (b)</td>
<td>Disciplinary sanctions for inmates</td>
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<tr>
<td>115.78 (c)</td>
<td>Disciplinary sanctions for inmates</td>
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<tr>
<td>115.78 (d)</td>
<td>Disciplinary sanctions for inmates</td>
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<tr>
<td>115.78 (e)</td>
<td>Disciplinary sanctions for inmates</td>
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<td>Section</td>
<td>Description</td>
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<tr>
<td>115.78 (f)</td>
<td>Disciplinary sanctions for inmates</td>
</tr>
<tr>
<td>115.78 (g)</td>
<td>Disciplinary sanctions for inmates</td>
</tr>
<tr>
<td>115.81 (a)</td>
<td>Medical and mental health screenings; history of sexual abuse</td>
</tr>
<tr>
<td>115.81 (b)</td>
<td>Medical and mental health screenings; history of sexual abuse</td>
</tr>
<tr>
<td>115.81 (c)</td>
<td>Medical and mental health screenings; history of sexual abuse</td>
</tr>
<tr>
<td>115.81 (d)</td>
<td>Medical and mental health screenings; history of sexual abuse</td>
</tr>
<tr>
<td>115.81 (e)</td>
<td>Medical and mental health screenings; history of sexual abuse</td>
</tr>
<tr>
<td>115.82 (a)</td>
<td>Access to emergency medical and mental health services</td>
</tr>
<tr>
<td>115.82 (b)</td>
<td>Access to emergency medical and mental health services</td>
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<td>Code</td>
<td>Section Description</td>
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</tr>
<tr>
<td>115.82 (c)</td>
<td>Access to emergency medical and mental health services</td>
</tr>
<tr>
<td></td>
<td>Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?</td>
</tr>
<tr>
<td>115.82 (d)</td>
<td>Access to emergency medical and mental health services</td>
</tr>
<tr>
<td></td>
<td>Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?</td>
</tr>
<tr>
<td>115.83 (a)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?</td>
</tr>
<tr>
<td>115.83 (b)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?</td>
</tr>
<tr>
<td>115.83 (c)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Does the facility provide such victims with medical and mental health services consistent with the community level of care?</td>
</tr>
<tr>
<td>115.83 (d)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if &quot;all male&quot; facility. Note: in &quot;all male&quot; facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)</td>
</tr>
<tr>
<td>115.83 (e)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if &quot;all male&quot; facility. Note: in &quot;all male&quot; facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)</td>
</tr>
<tr>
<td>115.83 (f)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?</td>
</tr>
<tr>
<td>115.83 (g)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?</td>
</tr>
<tr>
<td>115.83 (h)</td>
<td>Ongoing medical and mental health care for sexual abuse victims and abusers</td>
</tr>
<tr>
<td></td>
<td>If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)</td>
</tr>
<tr>
<td>115.86 (a)</td>
<td>Sexual abuse incident reviews</td>
</tr>
<tr>
<td></td>
<td>Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?</td>
</tr>
<tr>
<td>Section</td>
<td>Title</td>
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<td>--------------------------------------------</td>
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<tr>
<td>115.86 (b)</td>
<td>Sexual abuse incident reviews</td>
</tr>
<tr>
<td>115.86 (c)</td>
<td>Sexual abuse incident reviews</td>
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<td>115.86 (d)</td>
<td>Sexual abuse incident reviews</td>
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<tr>
<td>115.86 (e)</td>
<td>Sexual abuse incident reviews</td>
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<td>115.87 (a)</td>
<td>Data collection</td>
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<tr>
<td>115.87 (b)</td>
<td>Data collection</td>
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<tr>
<td>115.87 (c)</td>
<td>Data collection</td>
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<td>115.87 (d)</td>
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<tr>
<td>115.88(a)</td>
<td>Data review for corrective action</td>
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<td>115.88(a)</td>
<td>Data review for corrective action</td>
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<tr>
<td>115.88(b)</td>
<td>Data review for corrective action</td>
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<tr>
<td>115.88(c)</td>
<td>Data review for corrective action</td>
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<tr>
<td>115.88(d)</td>
<td>Data review for corrective action</td>
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<td>115.89(a)</td>
<td>Data storage, publication, and destruction</td>
</tr>
<tr>
<td>115.89(b)</td>
<td>Data storage, publication, and destruction</td>
</tr>
<tr>
<td>115.89(c)</td>
<td>Data storage, publication, and destruction</td>
</tr>
<tr>
<td>115.89(d)</td>
<td>Data storage, publication, and destruction</td>
</tr>
<tr>
<td>115.401(a)</td>
<td>Frequency and scope of audits</td>
</tr>
<tr>
<td>115.401 (b)</td>
<td>Frequency and scope of audits</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
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</tr>
<tr>
<td>Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)</td>
<td>no</td>
</tr>
<tr>
<td>If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)</td>
<td>na</td>
</tr>
<tr>
<td>If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

| 115.401 (h) | Frequency and scope of audits |
|-------------------------------------------------|
| Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |

| 115.401 (i) | Frequency and scope of audits |
|-------------------------------------------------|
| Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |

| 115.401 (m) | Frequency and scope of audits |
|-------------------------------------------------|
| Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |

| 115.401 (n) | Frequency and scope of audits |
|-------------------------------------------------|
| Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |

| 115.403 (f) | Audit contents and findings |
|-------------------------------------------------|
| The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |