

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS

NATIONAL  
PREA  
RESOURCE  
CENTER



**BJA**  
Bureau of Justice Assistance  
U.S. Department of Justice

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

**Name of facility:** Woodman Unit

**Physical address:** 1210 Coryell City Road, Gatesville, Texas, 76528

**Date report submitted:** February 21, 2015

**Auditor Information**

**Address:** P. O. Box 1265  
Midlothian, VA 23113

**Email:** David.haasenritter@us.army.mil

**Telephone number:** 540 903 6457

**Date of facility visit:** September 2 – 4, 2014

**Facility Information**

**Facility mailing address: (if different from above)** Same as above

**Telephone number:** 254-865-9398

**The facility is:**

<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
<input type="checkbox"/> Private not for profit		

**Facility Type:**  Jail       Prison

<b>Name of PREA Compliance Manager:</b> Sally Barrese	<b>Title:</b> Sergeant	
<b>Email address:</b> NA	<b>Telephone number:</b>	

**Agency Information**

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

**Governing authority or parent agency: (if applicable)** State of Texas

**Physical address:** 861-B I-45 North, Huntsville, Texas, 77320

<b>Mailing address:</b> (if different from above) P.O. Box 99, Huntsville, Texas, 77342			
<b>Telephone number:</b>		936-295-6371	
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<b>Agency-Wide PREA Coordinator</b>			
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## AUDIT FINDINGS

### NARRATIVE:

The PREA audit of the Woodman Unit was conducted September 2 – 4, 2014 by David Haasenritter and Patrick Keohane. One week prior to the audit, the lead auditor received the PREA questionnaire and files for each standard by thumb drive from Texas Department of Criminal Justice (TDCJ). The lead auditor contacted Just Detention International (JDI); reviewed interviews of the Director’s representative, and PREA Coordinator done by PREA Auditor Jim Allen; and reviewed the TDCJ website prior to the audit. The lead auditor and TDCJ discussed additional documents required, recommended policy changes, and a tentative schedule. The night before the audit the facility provided an alpha listing of all offenders housed at the facility; lists of offenders for specific categories to be interviewed; and a lists of all staff by duty position and shifts that were used to identify offenders and staff to be interviewed (random and specific category).

Key facility staff during the audit included Ms. Beth Morris, Acting Warden; Ms. Sally Barrese, Unit Safe Prisons Program Manager; Ms. Brandy Mouse, ACA Coordinator; Major Allen Miller, Security; Captain Kristi Alexander, Security; and Ms. Valencia Pollard Health Administrator. Ms. Lynne Sharp, TDCJ SAFE Prisons/PREA Manager; and Regional Director Eric Guerrero also played a key role in assisting the auditors with the PREA audit.

Following the entrance meeting with staff, the audit team toured the facility on September 2, 2014. Following the tour, the auditors reviewed investigation files and began the interviews. All required facility staff and offenders interviews were conducted on-site. Interviews included random staff and minimum of one offender from every housing area selected by the auditors from a list of all the offenders and staff in the facility. In addition, offenders who were identified as being in a designated group (.e.g., disabled, limited English speaking ability, LGBTI, or who had reported a sexual abuse) and other identified specialized staff including the Warden, PREA

Manager, Investigator, first responders, health care providers, and mental health professionals were interviewed. Total of 24 offenders (additionally one refused) and 38 staff (in addition to the Directors representative and PREA Coordinator previously interviewed by another PREA auditor) were interviewed. Additionally, two members of the Texas Board of Corrections Office of Inspector General (OIG) who conduct or supervise criminal sexual abuse investigations were interviewed. Following the audit, the lead auditor conducted an interview of the TDCJ Director Private Facility Contract Monitoring/Oversight Division and TDCJ SAFE Prisons/PREA Manager, and facilities in Crisis, Inc (Killeen, TX) staff. The auditor found the staff and offenders to be aware of PREA. Staff training and personnel records, and offender records were also reviewed during the audit.

Ten investigations of allegations were reviewed. Eight were offender on offender allegations: one was substantiated for sexual harassment; six were unsubstantiated for sexual assault; and one was unfounded for sexual assault. There was two staff on offender allegations: one unsubstantiated sexual harassment; and one unsubstantiated sexual abuse.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the facility a final finding, the auditor did provide a preliminary status of his findings. The auditor thanked TDCJ, Region VI, and Woodman Unit staff for their hard work and commitment to the Prison Rape Elimination Act.

During the interim report writing and corrective action period, the auditor reviewed modified policies; additional documents; and conducted phone interviews with staff and outside agencies. Lynne Sharp and Shannon Kersh were very helpful in coordinating all the TDCJ and Woodman Unit phone interviews and additional documentation.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Mission of the Texas Department of Criminal Justice (TDCJ) and the Woodman Unit is to "provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime."

The Woodman Unit is an intake program capable of housing 909 State Jail and TDCJ offenders. It is a minimum security female facility and is located north of the city of Gatesville, Texas. The facility was opened in 1997 and is sited on 15 acres of State property.

The design of the Woodman Unit provides for two, 400 bed housing structures (J and H). These structures are further divided into eight, 50 bed dormitories each. The dormitory units provide adjacent counselor offices, day rooms, showers, commodes and lavatories.

A curved chain link fence with razor wire surrounds the facility and there is a 24/7 roving patrol on the perimeter.

Other structures include spaces for education, medical services, food service, maintenance, recreation, line control, central control, and a separate cell unit providing 109 beds for pre-hearing detention, in-transit, and administrative segregation.

There are two perimeter sally ports, one at the front entrance for pedestrians/employees and one at the rear for vehicles. Visitor processing and an armory, located at the front gate, provides control for all staff/visitor entry and exit.

## **SUMMARY OF AUDIT FINDINGS:**

On September 2 - 4, 2014, the on site visit was completed at the Woodman Unit. The interim report was provided on October 16, 2014 reporting 39 met standards and four (4) not meet standards. On January 22, 2015, TDCJ and Woodman Unit completed corrective action plans on each of the standards and the auditor started the final report. The results of Woodman Unit PREA audit is listed below:

Number of standards exceeded:	1
Number of standards met:	42
Number of standards not met:	0
Non-applicable:	0

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Texas Department of Criminal Justice (TDCJ) has a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. Safe Prisons/PREA Plan outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment, other agency policies such as Executive Directives, Security Memorandums, and post orders supplement the main PREA policy. Agency policies and procedures were well organized and have been continually revised over the last few years as TDCJ has developed and implemented PREA guidance and procedures.

Mr. William Stephens is the Director of Correctional Institution Division (CID) is the PREA Coordinator. He has direct access to the Executive Director, and has the authority to manage the Safe Prison/PREA Program. He supervises the SAFE Prison/PREA office headed by Ms. Sharp, SAFE Prisons/PREA Manager. She supervises the regional PREA Managers (6), and provides guidance through them and sometimes directly to the Unit PREA Compliance Managers (91). She conducts training and meetings to keep unit PREA compliance managers up to date on any changes and best practices. Ms. Sharp is a Certified PREA Auditor, and is very knowledgeable of PREA and the PREA standards. Mr. Stephens stated he had enough time to manage PREA thanks to having a SAFE Prison/PREA office headed by Ms. Sharp. Ms. Sharp stated she had enough time to manage PREA duties.

Officer Barrese is the Woodman Unit PREA Compliance Manager. She has been the PREA Compliance Manager since May 2014. She claimed to have enough time to perform her PREA duties.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ has renewed one contract to date. The contract was amended to include entity's obligation to adapt and comply with PREA standards. Neither contract nor does Safe Prisons/PREA Plan state TDCJ shall provide contract monitoring to ensure that the

contractor is complying with the PREA standards. Per conversation with Mr. Oscar Mendoza, Director Private Facility Contract Monitoring/Oversight Division, they have monitors on site, but have not developed a process to monitor PREA. One private contract facility whose contract was renewed received and passed its PREA audit.

During the corrective action period, TDCJ CID office states the modifying of the current renewed contract has started the process to amend it to include PREA monitoring. New/renewed contracts will include language that states the department designated contract monitor will monitor the facility to ensure the contractor is compliant with PREA standards. Additionally, they stated they have been monitoring PREA standards every six months using a monitoring checklist. The auditor asked for a copy of a completed monitoring checklist from one of the private facilities that demonstrates monitoring for PREA type standards are being done by TDCJ monitors. A copy was provided of a monitoring done in March 2014. It does monitor Safe Prisons/PREA areas, but recommended additional PREA items be checked. Ms. Sharp, SAFE Prisons/PREA Manager is updating the checklists now that TDCJ has undergone some PREA audits.

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

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

Based on review of the staffing plan and interviews, Woodman Unit has developed a staffing plan that is based on at least the eleven criteria of the standard to include generally accepted detention and correctional practices; components of the facility's physical plant (including "blind-spots" or areas where staff or offenders may be isolated); composition of the offender population; number and placement of supervisory staff; and institution programs. The staffing plan is reviewed annually by the Woodman Unit leadership; regional staff; TDCJ Correctional Institution Division Security Systems Office; in coordination with the PREA Coordinator. The facility makes its best efforts to comply with the plan and documents all deviations to the plan. Unannounced rounds are done randomly and documented in logs. The agency has a policy that prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Staff and offender interviews confirmed the unannounced rounds by supervisors.

### **§115.14 – Youthful Inmates**

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

Does Not Meet Standard (requires corrective action)

Woodman Unit does not house youthful offenders. Youthful offenders are housed at Clemens Unit (males) and Hilltop Unit (females). Safe Prison/PREA Plan covers the standard of separating youthful offenders from adult offenders and ensuring youthful offenders have access to programs and work opportunities.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Through review of policy and documentation, interviews of staff and offenders, and observation it was determined Woodman Unit: does not conduct cross gender strip searches; body cavity searches are only done by medically trained professionals; and staff are prohibited and do not frisk transgender or intersex offenders to determine offenders' genital status. Policy and procedures are implemented to enable offenders to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks; and that male staff announce their presence when entering an offenders housing unit. The auditor observed male staff announce their presence when they enter the housing unit throughout the week, and staff always announced when the auditors were entering the housing unit.

Review of training records, lesson plans, and interviews of staff demonstrated staff had been trained on how to conduct cross-gender pat-down searches in a professional and respectful manner, but they do not do any cross-gender searches. No cross gender pat down searches had been logged. Offenders confirmed female staff does all the pat down searches and they have not been stopped from attending any program or work opportunity due to lack of female staff to conduct the pat-down searches. The auditors observed a thorough and consistent pat-down search done on female offenders. Female offenders are stripped search upon arrival into the facility in a room with no cameras by female staff.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ has taken steps to ensure offenders with disabilities and offenders with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Security Memorandum 05.50 and Administrative Directive 04.25 addresses the use of Spanish interpreters. TDCJ employs "qualified interpreters" who are designated staff who has demonstrated a satisfactory level of competency in both Spanish and English languages through a Language Assessments Scale Spanish oral proficiency test. PREA handouts and offender handbooks are in English and Spanish. English and Spanish Safe Prisons/PREA posters are posted throughout the facility for offenders and staff to see. Offender interviews with Spanish speaking interpreters were easily conducted and offenders seemed at ease with the staff translating. Staff and offenders stated offenders are not used as interpreters when addressing sexual abuse and sexual harassment allegations. By policy American Sign Language Interpreter Services will be provided if deemed required. No hearing impaired or blind offenders were identified.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Through review of policies, personnel records and interviews it was determined TDCJ has established a system of conducting criminal background checks for new employees and contractors who may have contact with offenders to ensure they do not hire or promote anyone who had engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent or refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent. Policy and interviews verified that the agency considers incidents of sexual harassment in hiring and promotion of staff and contractors as applicable. TDCJ requests previous employers to provide information which was verified by examples of requests. TDCJ employs a system that captures criminal information on current employees and contractors daily. Woodman Unit personnel staff provided examples.

During the audit of Woodman Unit it was determined it did not meet Standard 115.17 (h) which requires unless prohibited by law, 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. Through interviews it was determined if an employer requests information on a former employee it is only provided if request has a release form from the employee. Initially TDCJ stated it was covered as not releasable under the Public Information Act and public law which required a release form for the information to be released. During the corrective action period, TDCJ have determined a release form is not required to release information to an institutional employer IAW the Texas Attorney General Public Information Handbook. TDCJ Human Resource staff at the agency level was informed through an email of the change. Per TDCJ CID staff, inquiries are handled at the TDCJ agency level and not at the unit level as previously informed, thus the email was not sent to all units.

TDCJ policy required staff to disclose any sexual abuse in prison or other institution; convicted of or civilly or administratively adjudicated for engaging in sexual activity in the community by force or coercion or victim did not consent. This was confirmed during interviews. During the audit it was determined TDCJ had to implement a policy, procedure and practice to ask employees each year to disclose any sexual misconduct covered under PREA. Following the audit and during the corrective period, TDCJ implemented new policy and procedures, and demonstrated practice of staff annually disclosing any sexual misconduct under PREA during their annual in-service training. TDCJ is using the same form that staff signs stating they understood the PREA training they received to ask the staff member whether they engaged in sexual misconduct during the year.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Though interviews of the Director's designee, PREA Coordinator and Warden it was determined that the TDCJ considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect offenders from sexual abuse. Currently the facility has 75 cameras. Security Operations Procedures Manual directs coordination with agency Safe Prison/PREA Compliance Manager prior to deleting, installing, or relocating video surveillance equipment.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy and procedures outline evidence protocols for administrative proceedings and criminal prosecutions; and requirements for forensic medical exams. The OIG conducts all criminal investigations, and is required to follow PREA standards. TDCJ protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. The auditors conducted interviews with Woodman Unit and OIG investigators. Hospitals with SANE/SAFE are utilized and services are provided at no costs to the offender when requested. No forensic medical examinations were conducted during the audit period. TDCJ has a MOU with the Families in Crisis Inc (Killeen, TX) to provide a victim advocate services to the victim for six TDCJ facilities to include the Woodman Unit. The Families in Crisis Inc provides emotional support, crisis intervention, information, and referrals to the victim. Additionally, TDCJ has designated staff as offender victim representatives (OVR). OVRs are trained as victim advocates who can provide victim support to staff or offenders who have been sexually abused. The auditor reviewed the training records of the two designated OVRs and interviewed one of them, they are properly trained and knowledgeable of their role and responsibilities. The Families in Crisis Inc provided Woodman a phone number and address to write which is clearly posted in each housing area. The offenders are only allowed to write to them. Families in Crisis Inc are notified when a victim is sent to the hospital, which they immediately respond to provide services. For emotional support other than during a forensic exam, an appointment is scheduled. TDCJ has contacted Rape Crisis Centers for support, only Families in Crisis Inc (Killeen, TX) have responded.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policy requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, that all allegations of sexual abuse or sexual harassment are referred for investigation by the appropriate authority. All cases referred for investigation. The TDCJ policy describes the responsibilities of TDCJ and OIG. Interviews with investigators demonstrated the responsibilities were clearly established and understood by both agencies. An administrative or criminal investigation was completed on all allegations of sexual abuse and sexual harassment at the Woodman Unit.

### **§115.31 – Employee Training**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ provides all employees the required training annually during their annual in-service training conducted at the district training academy. The training includes a video of Safe Prison/PREA TDCJ staff and leadership. Woodman Unit also conducts some PREA training at roll call. Training records were reviewed to ensure all staff completed the training. All staff has been trained. TDCJ has been training on sexual abuse and sexual harassment for a few years. Review of the lesson plan and slides demonstrated all the required areas are covered. Interviews of staff demonstrated they understand the zero tolerance policy; the agency policy and procedures for prevention, reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting. The week of the audit was the first week TDCJ documented through employee signature or electronic verification, that employees understand the PREA training they have received.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

All contractors and volunteers who have contact with offenders have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Interviews of contractors and volunteers demonstrated their knowledge of PREA, their responsibilities and the agency zero tolerance policy. PREA is covered during their orientation and includes the TDCJ PREA video. Volunteers are provided a volunteer handbook that covers PREA. The auditor reviewed contractor and volunteer training records, each have signed they understand the PREA training they received. Acknowledging they understood the training began in August 2014.

### **§115.33 – Inmate Education**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

During intake offenders are provided information through a PREA pamphlet and offender rule book (both available in English and Spanish) that explains the agencies zero tolerance policy regarding sexual abuse and sexual harassment; and how to report such incidents. During facility orientation (within 30 days of arrival), offenders receive additional training which consists of video and additional information which expands on the previous information provided in the pamphlet and handbook. Additionally, offender peer education is used. TDCJ and Woodman Unit document offenders having received the training. Posters and offender handbooks are provided to offender or posted in the housing units in formats accessible to all offenders. There is a contract to provide American sign language if needed.

During the tour and interviews most offenders acknowledged the information being provided upon arrival and orientation. They definitely knew the agency zero tolerance policy.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

All investigators have received training in the required PREA Investigation training subjects. Interview of OIG investigator acknowledged they took the required training. Woodman Unit investigators also attend the general PREA training required of all employees. The lesson plans, slides and sign in sheets were reviewed and interview of the investigators demonstrated they understood the how to conduct a sexual abuse investigation in a confinement setting and what their roles were. The training included 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. Interviews of investigators verified their knowledge of conducting investigations. OIG investigators are trained using the NIC PREA investigator course.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in the required PREA subjects. University of Texas Medical Branch (UTMB) conducts the training. Training records for medical and mental health care staff (contractors) demonstrated specialized and general PREA training was conducted. The auditor checked training records in addition to what was provided with the questionnaire. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Medical staff does not conduct forensic medical examinations.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Woodman Unit follows the TDCJ PREA screening form and process. The auditor reviewed policy, and had the facility walk the auditor through the screening process from start to finish. The screen starts upon arrival but it is not completed till approximately 10 – 14 days following arrival. Due to the many different departments that make a determination of whether an offender is at risks of victimization or possible sexually abusive, sometimes even before all the criteria is reviewed, it was determined not to be objective. The intake screening did not consider whether the offender perceives to have a mental disability; screeners did not provide own perception if person is gender nonconforming; and criminal history was not provided till the final review by the classification committee; and whether the offender perceives to have a mental and physical disability is asked during a medical screen, but the information is not provided to the SAFE Prison Officer or committee for screening purpose. During the report writing period, the system to screen and forms were adjusted to be in compliance with PREA, and implemented. Completed new offender screen forms were provided to the auditor. Some of the changes were previously part of the process but was changed, so staff was used to some of the changes. Screens are now completed within 72 hours; consider whether the offender perceives to have a mental disability; and screeners provide their own perception if person is gender nonconforming.

The classification committee reassesses the offender's risks of victimization or abusiveness and by policy the offenders risks level is reassessed again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness. The auditor reviewed random screening forms to include those that were reassessments. The offender population remembers being asked the questions and being screened upon arrival. Staff interviews confirmed appropriate controls have been implemented to

ensure that sensitive information is not released and exploited by staff or other offenders.

### **§115.42 – Use of Screening Information**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The auditor reviewed policies, random classification forms and decisions, and interviewed TDCJ central office and Woodman Unit staff. The Woodman Unit uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping offenders at high risks of being sexually victimized separate from those at high risks of being sexually abusive. Housing and program assignments are done on a case by case basis. TDCJ does not place lesbian, gay, bisexual, transgender, or intersex offenders 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.

By policy and interviews LGBTI offenders are not housed in dedicated facilities or housing units; and transgender or intersex offenders are reassessed twice each year and have the opportunity to shower separately. There were inmates who were lesbian and they acknowledged they were treated with respect and were not housed in dedicated housing area.

### **§115.43 – Protective Custody**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Agency policy states offenders at high risks 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. Reviews of status as protective custody are completed every 30 days. There were no offenders in protective custody who were high risks for sexual victimization to interview. Staff interviews verified offenders at high risks of sexual victimization are not placed in involuntary segregation unless other measures have been assessed. No staff could remember of such a case in the past.

### §115.51 – Inmate Reporting

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ and Woodman Unit provide multiple internal and external ways for offenders to report sexual abuse, sexual harassment and retaliation. Offenders can report verbally and in writing to staff, report through the grievance system, or send an anonymous note. These reporting systems were demonstrated through interviews of offenders, staff and review of policies, offender handbooks and posters demonstrate these offender reporting systems. During interviews most offenders stated they felt comfortable reporting sexual abuse and harassment if it occurred at the Woodman Unit.

TDCJ and Woodman units can write to the OIG or PREA Ombudsman to report sexual assault or harassment. The OIG or PREA Ombudsman allows offenders to contact as an outside agency that is able to receive and immediately forward reports of sexual abuse and sexual harassment to agency officials, allowing the offender to remain anonymous upon request. Reports to the PREA ombudsman may be made confidentially. Examples of offenders reporting verbally to staff were reviewed when investigative cases were reviewed.

TDCJ policy and staff fliers provide information on PREA to include ways for staff to privately report sexual abuse and sexual harassment of offenders. TDCJ staff can inform unit staff or five different agencies by phone or in writing: PREA Ombudsman Office; OIG; TDCJ Ombudsman Coordinator; Safe Prison Program Management Office; or CID Ombudsman Office. During interviews some of the staff knew they could privately report sexual abuse and harassment of offenders.

### §115.52 – Exhaustion of Administrative Remedies

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ has adopted administrative procedures to address offender grievances regarding sexual abuse. Review of policies and staff and offender interviews confirm the system is established. There was no grievance filed reference sexual abuse. Auditor reviewed one grievance reference sexual harassment which was properly handled.

### §115.53 – Inmate Access to Outside Confidential Support Services

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ has requested a number of rape crisis centers to provide offenders with access to outside victim advocates for emotional support services related to sexual abuse. TDCJ has a MOU with Families in Crisis Inc for six facilities to provide emotional support services. TDCJ reports no other Rape Crisis Center replied to provide support. Housing units have the phone number and mailing address for Families in Crisis Inc posted, but according to TDCJ Families in Crisis Inc will not take phone calls from the offenders. Phone system will not allow offenders to call the number. Offenders must write to them, or Safe Prison/PREA Compliance manager must schedule an appointment. Offenders have requested and seen the victim advocate. A list of Texas Rape Advocacy Center numbers and addresses is provided in the library though offenders were not aware of it, nor was it posted informing them of that. If the offender needs to see someone immediately, Offender Victim Representative (trained staff member) is used if Families in Crisis Inc cannot respond.

During the corrective action period, TDCJ established as system wide process for offenders to write to Rape Advocacy Center for emotional support. Due to increase in mail fraud within the system, the offender would write the PREA ombudsman who would screen for fraud and written contraband before faxing to the addressed Rape Advocacy Agency. Offender mail to the PREA ombudsman is confidential. TDCJ developed and provided offenders information on the new process.

### §115.54 – Third-Party Reporting

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ web site provides a link to the TBCJ PREA Ombudsman who can be contacted to report sexual assaults through a third party. The link also states "Friends of offenders incarcerated in the TDCJ, family members, and the general public are encouraged to report allegations of sexual assault to the PREA Ombudsman Office, the TDCJ ombudsman coordinator, or the CID Ombudsman Office." It provides a number and address to the PREA Ombudsman Office. The PREA Ombudsman Office also provides recommended information to provide when reporting, though not required. This includes: name of the unit where the alleged victim is assigned; date and time the



alleged incident occurred; name and TDCJ number of the alleged offender victim; name and TDCJ number of the alleged assailant and witnesses; brief summary of the allegation; and correspondence that could assist in the investigation. Woodman Unit reported no third party reporting during the audit cycle. Offenders were familiar that family members and friends could do third party reporting. TDCJ "General Information Guide for Families of Offenders", also on the TDCJ website, has the same information SPPOM 04.02 Receiving Allegations of Sexual Abuse from an Outside Agency, and offender interviews, support compliance for this standard.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policy requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. Review of investigative files; and interviews of staff and offenders verified staff immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Interviews with offenders and staff did not reveal any incident of sexual abuse or harassment not reported.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policy requires staff to take immediate action to protect any offender they learn is subject to substantial risks. Interviews with staff demonstrate all staff interviewed knew the steps to take to protect an offender subject to risks of imminent sexual abuse. Security staff immediately employs protection measures as the information is reported. Per interview with Safe Prison/PREA Compliance Manager, no offender has reported substantial risks of sexual abuse.

### §115.63 – Reporting to Other Confinement Facilities

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Reviewed TDCJ policies and three examples of notification from within TDCJ of an offender reporting an incident while at Woodman Unit that occurred at another facility. Procedures include the unit notifying the TDCJ SAFE Prisons/PREA Manager who would make the notification within 72 hours to the head of the facility or appropriate office of the agency where the alleged abuse occurred. TDCJ SAFE Prisons/PREA Manager has a letter in writing prepared and faxed in most cases within 72 hours, sometimes even within 24 hours of the unit becoming aware of the incident. During the audit, the Regional Director modified the region policy to have the warden to first call the head of the facility or appropriate office of the agency where the alleged abuse occurred and then notify the TDCJ SAFE Prisons/PREA Manager who would make the notification within 72 hours to the head of the facility or appropriate office of the agency where the alleged abuse occurred.

### §115.64 – Staff First Responder Duties

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ and Woodman Unit policies clearly specify procedures to respond to an allegation of sexual abuse for both security and non-security staff. Random interviews with staff confirm both security and non-security staff knew what to do upon learning an offender was sexually abused. Good policy and training has prepared the staff to properly respond. Review of investigations further demonstrated security and non-security staff knew what to do as the first responder to a sexual assault. Though most cases was not in a time period that allowed for collection of physical evidence; security and non-security staff interviewed specifically knew what actions could destroy physical evidence.

### §115.65 – Coordinated Response

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Woodman Unit Safe Prison/PREA Plan was reviewed. It is modeled after the TDCJ Safe Prisons/PREA Operations Manual. The plan addresses training; responding to incidents of sexual abuse; and provides responses to an alleged sexual abuse incident for first responders, medical and mental health practitioners, investigators, and facility leadership. Interviews with staff (first responders, medical and mental health practitioners, investigators, and facility leadership) confirmed they were knowledgeable about the PREA plan and the coordinated duties and collaborative responsibilities.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ employees do not have collective bargaining rights or a union. As a result, there has been no collective bargaining agreements entered into since August 2012. TDCJ can remove alleged staff sexual abusers from contact with any offenders; or place the employee on paid administrative leave pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policies designated the Warden or Safe Prison/PREA Compliance Manager as the staff member to monitor for retaliation against staff or offenders who reported or had been sexually abused or harassed. The policies described procedures to be followed. At the Woodman Unit, the Warden monitors staff; Safe Prison/PREA Compliance Manager monitors the offenders.

Interviews of the Warden, Safe Prison/PREA Compliance Manager and offenders; and review of documentation demonstrated retaliation was monitored. Warden Morris was

very knowledgeable of her responsibilities to monitor staff. The Safe Prison/PREA Compliance Manager was monitoring offenders but was also still learning all she needed to do to monitor offenders. Offenders believed they were being monitored. It was recommended offender monitoring for retaliation be better documented. The process was recently started in TDCJ and Woodman Unit.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policies meet the requirements of the standard. Per interview with Warden, Safe Prison/PREA Compliance Manager, and offenders, there were no instances of using segregation housing to protect offenders who had alleged to have been sexually abused.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Based on review of the investigations, TDCJ and OIG policies; interviews of Woodman Unit and OIG investigators and offenders it was determined investigations into allegations of sexual abuse and sexual harassment are done promptly, thoroughly, and objectively for all allegations. All investigators have received special training in sexual abuse investigations; OIG used the NIC PREA Investigator course. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as offender or staff. Neither TDCJ nor OIG require an offender 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. Investigation files were organized and properly documented. Written reports are maintained as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Woodman Unit investigator starts all investigations and conducts administrative investigations. OIG is immediately notified of all sexual abuse cases and some sexual harassment cases, which it is responsible to investigate. There seemed to be a good

working relationship between the Woodman Unit and OIG investigators. There have been no criminal cases during the audit cycle.

Ten investigations of allegations were reviewed. Eight were offender on offender allegations: one was substantiated for sexual harassment; six were unsubstantiated for sexual assault; and one was unfounded for sexual assault. There was two staff on offender allegations: one unsubstantiated sexual harassment; and one unsubstantiated sexual abuse.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

A review of TDCJ policy, Woodman Unit investigations and interviews with the investigator and administrative staff confirm the Woodman Unit has no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

### **§115.73 – Reporting to Inmate**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

A review of TDCJ policies, a sample of recent investigations completed, interviews of staff and offenders, and notification memorandums indicated that offenders were informed of the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded. This process began in July 2014. By TDCJ policy, if the allegation of sexual abuse was by a staff member (except if unfounded), the offender is informed of the status of the staff member in writing to include whenever: the staff member is no longer posted within the offender's unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. If the offender was alleged to have been sexually abused by another offender, TDCJ informs the alleged victim whenever: the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or been convicted on a charge related to sexual abuse within the facility. Interview of

offenders confirmed they were informed of results of the investigation and any applicable action taken.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Per TDCJ policies and interviews with TDCJ and Woodman Unit staff, staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and 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.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policies prohibit contractors or volunteers who engaged in sexual abuse to have contact with offenders and requires they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of offenders.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Per TDCJ policies and interviews with TDCJ and Woodman Unit staff, offenders are subject to disciplinary sanctions following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse; sanctions are commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories; and considers whether an offender's mental disabilities or mental illness contributed to his or her behavior. TDCJ prohibit all sexual activity between offenders to include consensual and discipline offenders for such activity, but does not consider it sexual abuse.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

During the audit it was determined TDCJ Safe Prison policies required medical and mental health follow-up meeting within 14 days for those offenders who experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community. Review of cases demonstrated medical and mental health screening was being conducted normally within 14 days of the intake screening. Interviews of medical and mental health staff, and offenders confirmed follow-up meetings are scheduled and conducted. Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health staff, and other staff as required.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Review of TDCJ policies, incident documents, and interviews with staff and offenders confirm offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services from medical and mental health staff. They would also receive timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. Treatment would be provided to the victim without financial costs. Offenders were positive about the responsiveness of the medical and mental health staff.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

TDCJ policies, interviews with staff and offenders; and medical and mental health documentation demonstrate there is on-going medical and mental health care for sexual abuse victims and abusers. Treatment is at no costs to the offenders. There has been no requirement to offer pregnancy tests. Per policy, offender victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Mental health evaluations are conducted on all known offender on offender abusers within 60 days of learning such abuse, and treatment is offered.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

SPPP covers everything except it refers to AD 02.15 for what the incident review team should use. TDCJ policy for incident reviews was not modified to meet PREA requirements. A new policy was in draft during the audit period but had not been signed or implemented. The reviews conducted were very thorough and timely, but did not: 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; examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and provide recommendations for improvement and submit such report to the facility head and PREA Compliance Manager. During the interim report writing period the new policy was put in effect. Waiting for an example of an incident review at Woodman using new policy. The Woodman Unit provided an incident review using the new guidance. It was a very good sexual abuse incident review that included all the elements of the standard.



### **§115.87 – Data Collection**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

All sexual assault and improper sexual activity with a person in custody is documented in the OIG case management data base. It collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument. The database allows TDCJ to submit the annual DOJ Survey of Sexual Violence in a timely fashion. The auditor reviewed DoJ 2012 Survey of Sexual Violence.

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Texas Board of Criminal Justice PREA Ombudsman coordinates with TDCJ and OIG to produce the annual report. Fiscal Year 2013 annual report was reviewed and found to be very extensive. It combines key data, policies and program changes by TDCJ Correctional Institution Division, PREA Ombudsman, and Office of the Inspector General. The TDCJ Correctional Institution Division portion covers policy changes, camera improvements, training, tracking and reporting actions. The PREA Ombudsman section covers its activities during the year and provides some statistical information for FY 2013. The OIG portion provides additional FY 2013 data and some comparisons of data from 2009 – 2013. The report is published in the Texas Board of Criminal Justice PREA Ombudsman website. TDCJ reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions.

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

Exceeds Standard (substantially exceeds requirement of standard)

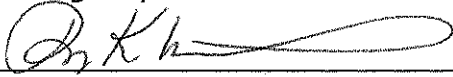
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

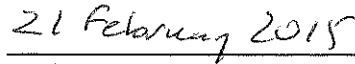
Based on TDCJ policy, review of the website, and interviews of staff it is determined data is properly stored, maintained and secured. Access to data is controlled. Aggregate data on all its facilities under its control is readily available to the public through its website. All criminal investigations and sexual abuse investigation checklists and summaries are permanently maintained.

**AUDITOR CERTIFICATION:**

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



Auditor Signature



Date