PREA AUDIT REPORT Interim Final ADULT PRISONS & JAILS

Date of report: 07-31-17.

Auditor Information				
Auditor name: John Barkley				
Address: 287 Middlesex Road, Columbia, SC				
Email: fiddlinwarden@yahoo.com				
Telephone number: 803-451-1382				
Date of facility visit: July 13 th and 14 th 2017				
Facility Information				
Facility name: Brazos County Detention Center				
Facility physical address: 1835 Sandy Point Road, Bryan, Texas 77803				
Facility mailing address: (if different from above)				
Facility telephone number: 979-361-4900				
The facility is:	Federal	🗆 State		🖂 County
	🗆 Military	🗆 Municij	bal	Private for profit
Private not for profit				
Facility type:	Prison	🖂 Jail		
Name of facility's Chief Executive Officer: Wayne Dicky, Jail Administrator				
Number of staff assigned to the facility in the last 12 months: 155				
Designed facility capacity: 1089				
Current population of facility: 674				
Facility security levels/inmate custody levels: Minimum, Medium, Maximum				
Age range of the population: 17 years of age and up (male and female)				
Name of PREA Compliance Manager: Kevin Stuart			Title: Lieutenant	
Email address: kstuart@brazoscountytx.gov			Telephone number: 979-361-4846	
Agency Information				
Name of agency: Brazos County Sheriff's Office				
Governing authority or parent agency: (if applicable) Click here to enter text.				
Physical address: 1700 Hwy 21 West, Bryan, Texas 77803				
Mailing address: (if different from above) Click here to enter text.				
Telephone number: 979-361-4900				
Agency Chief Executive Officer				
Name: Christopher C. Kirk			Title: Sheriff	
Email address: chriskirk@highsheriff.com			Telephone number: 979-361-4900	
Agency-Wide PREA Coordinator				
Name: Kevin Stuart			Title: Lieutenant	
Email address: kstuart@brazoscountytx.gov			Telephone number: 979-361-4846	

AUDIT FINDINGS

NARRATIVE

A Prison Rape Elimination Act Audit of the Brazos County Detention Center (BCDC) was performed July 13th and 14th, 2017. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. This is the second audit that has been performed on this detention center. The first audit was conducted three years ago.

An entrance meeting was held the morning of the onsite audit with the following persons: Brazos County Sheriff Chris Kirk, Jail Administrator Wayne Dicky, Compliance Officer Jerry Barratt, Lt. Clarence Henry, Lt. Reginald Walker, Lt. Belinda Jackson, Lt. Kevin Stuart, and Sgt. James Mitchell.

The auditor wishes to extend his appreciation to Sheriff Kirk and Jail Administrator Dicky and their staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests made by the auditor.

The auditor would also like to recognize Lt. Kevin Stuart and Sgt. James Mitchell for their hard work and dedication to ensure the facility is compliant with all PREA standards. Lt. Stuart is overseeing the prisons PREA compliance and his dedication to providing a prison environment where the standards were understood and followed was apparent to this auditor. He was very engaged with all staff and that communication ability was helpful in compliance with the PREA standards. The Lieutenant and the Sargeant had a great relationship with the staff of all shifts because they had risen throught the ranks and have years of experience at the Detention Center.

The auditor provided the facility with a Notification of Audit on June 1st 2017 The notification contained information on the upcoming audit and stated that any inmate with relevant information related the the facility's compliance with the U.S. Department of Justice PREA standards should mail the auditor at least 10 days prior to the onsite audit date (July 13th and 14th). The auditor instructed the facility to post this notification in all housing units and throughout the facility at least six weeks prior to the onsite audit. During the facility tour, the auditor observed the posting in all housing areas and throughout the facility.

Prior to the auditors arrival the detention center provided the auditor with access to the the detention policies, staffing analysis, post charts and other pertinent documentation to evaluate compliance with the standards. The auditor was provided 3 weeks prior to arrival of the on site audit with a completed copy of the facility's pre-audit questionnaire. The auditor reviewed the questionnaire at that time and confirmed that all required information was provided.

After the entrance meeting, the auditor was given a complete tour of all areas of the facility, including; all general population living units, pre booking, classification, medical, kitchen, visitation area, and Special Housing Unit

A total of 24 staff were interviewed with at least one staff member interviewed from each interview category, with the exception of the interviews related to educational staff who supervise youthful inmates and nonmedical staff involved in cross-gender searches. These interview types were not applicable to this facility.

Staff interviews were conducted with staff from both 12 hour shifts

A total of 34 (10 females, 24 males) inmates were interviewed with at least one inmate interviewed from each interview category, with the exception of the interviews related to youthful inmates and inmates placed in segregated housing for risk of sexual victimization, and transgender inmates (these interview types were not applicable to this facility). There are 8 direct supervision housing quads for the male general population,

and separate pods in the special housing unit that are used for security detention. The female unit is not direct supervision but has small self contained units. At least one inmate was interviewed from each of these separate housing areas.

Telephone interviews were conducted with volunteers, the SAFE/SANE staff from the hospital where the inmate would be transported and the Director of the local Sexual Assault Center.

Throughout the pre-audit and onsite audit all questions asked by the auditor were answered. When the audit was completed, the auditor conducted an exit briefing on July 14, 2017. The auditor gave an overview of the audit and commended the staff on the structure that they maintain at the detention center and how the direct supervision of the inmates contributed to the inmates feeling they were safe from sexual harassment and assault. With such a constant turnover of inmates who many times come for a short period the staff are clearly sharing the detention centers zero tolerance policy to sexual assault and harassment because all inmates interviewed clearly had heard about the zero tolerance policy.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Brazos County Detention Center is a jail designed for direct supervision with the general population of male inmates and with the female inmate general population it is designed to have smaller living areas to keep control and offer more manageablility. As the first entry point of anyone arrested in Brazos county from a number of law enforcement agencies the staff must process, evaluate and keep the variety of offenders who are in pretrial status safe. The design of the prisons in pods helps the detention center place inmates in the safest environment due to their behavior, criminal history and prea risk assessment.

The detention center has a total of 8 separate pods for males with a correctional officer always on site and the beds are bunk beds on two levels placed directly facing the officer. There are also cameras placed within those living pods that are monitored by an officer and recorded. In the female unit in addition to cells used for restricted housing there are 10 smaller divided pods where inmates live in open barracks style. The use of a Guardian RFID in the female unit and in the Special Housing Unit allows supervisors to monitor when the staff have checked a living area and alerts the employee and staff when it is time to check the area or if it is past time. This affords the opportunity for the inmate to be seen by the staff as they are making their rounds.

Volunteer programs are offered for the inmate population. Many of the inmates are used for work within the jail. Feeding is done within the living unit and also offers an opportunity for the officer to confirm the inmates status and presence for count.

SUMMARY OF AUDIT FINDINGS

After a review of policies and procedures, interviews with staff and inmates, and a tour of all aspects of the facility, Brazos County Detention Center is found to be in compliance with all applicable standards.

Number of standards exceeded: 4

Number of standards met: 36

Number of standards not met: 0

Number of standards not applicable: 3

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

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

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.

BCDC PREA Policy 2014-0812 states the jail will take appropriate actions to ensure a zero tolerance toward all forms of sexual abuse and sexual harassment in order to promote the safety of inmates. The Department will implement federal Prison Rape Elimination Act (PREA) Standards to ensure that all aspects of operations work toward preventing, detecting and responding to such conduct resulting in a safer environment.

Definitions of prohibited behaviors regarding sexual assault and sexual harassment were located in the Glossary of Terms.

The policy includes sanctions for those found to have participated in prohibited behaviors.

There is one PREA Coordinator for the Brazos County Detention Center and that Lieutenant is a direct report to the Jail Administrator.

The PREA Coordinator is responsible for the entire detention center.

Based on the interview with the Jail Administrator and the PREA Coordinator they are allotted ample time to oversee the detention centers efforts to ensure PREA compliance throughout the jail. Interview with the PREA Coordinator at the detention center indicates he is allotted ample time to oversee the facility's PREA compliance.

The PREA Coordinator for the jail constantly tracks activity and is immediately contacted via email if there are any allegations of sexual assault within the detention center.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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.

XX Not Applicable

This standard is not applicable because the Brazos County Detention Center has entered into no agreement for any other prison entity to house their inmates.

Standard 115.13 Supervision and monitoring

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

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.

A review of the staffing plan revealed that all areas of the prison must be covered. There are state statutes in Texas that require a certified officer to staff ratio with in the detention center and the jail can not operate below that number. The auditor performed a review of the inspections done by each shift and the areas in which they inspect. A review of the meeting minutes in which the staffing plan is evaluated and the placement of cameras was done. Interviews with line level staff to ensure that supervisors where coming at unannounced times during their shift and more than once.

Standard 115.14 Youthful inmates

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

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.

During the audit there was one 17 year old male within the whole facility. Through an interview with the inmate he felt safe in his environment. He had been placed in an entire SHU pod by himself and not locked in his cell. He had freedom of movement and was place in a cell where the officer had a clear visual to see the inmate. There was also a call button that the inmate could use if he required something. The inmate had been provided programming and outside recreation. For a 17 year old female the detention center must use a special management bed within the female unit but the inmate under direct supervision is able to participate in groups and recreation. The inmate is only in the cell for sleeping and use of the

toilet and shower.

Standard 115.15 Limits to cross-gender viewing and searches

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

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

BCDC Policy 2014-0812 clearly states:

Clothed Search: An officer commissioned by the Brazos County Sheriff's Office or any other Peace Officer who has lawfully arrested an individual and brought them to the Brazos County Jail may perform this search. An officer of the same gender will conduct the search except in an emergency.

Unclothed Search: Officers licensed and commissioned by the Brazos County Sheriff's Office should perform this search. Sheriff's office non-commissioned staff may conduct the search in an emergency. A person of the same gender will perform this search.

In the past 12 months, there have not been any cross-gender strip or cross-gender visual body cavity searches of inmates.

The policy also states that staff will not search or physically examine a transgender or intersex inmate fo the sole purpose of determining the inmate's genital status. It states that searches of transgender or intersex inmates shall be conducted in a professional, respectful and least intrusive manner possible, consistent with security needs.

At the time of the audit there were no transgender inmates who were housed at the detention center. There had not been a transgender who identified themselves in the past 3 years during the PREA risk assessment but through interviews with classification and pre-booking staff they were aware of the policy and the appropriate notifications to make should this be encountered.

The auditor witnessed the announcement of opposite gender entering a pod and interviews with inmates confirmed that an announcent is made of the opposite gender. The showers are partitioned in a way where viewing of the private areas of an inmate can't be observed while in the shower.

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

Exceeds Standard (substantially exceeds requirement of standard)

PREA Audit Report

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

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

During the on site audit the auditor observed posters throughout the facility in both English and Spanish. Brochures with the PREA information for inmates was printed in English and Spanish. The auditor randomly choose an inmate who only spoke Spanish and an officer who is proficient in Spanish was called to the interview area to interpret for the auditor. The Spanish speaking inmate was asked if he felt safe, did he know how to report, did he know who he could go to with staff if he needed to speak in Spanish. All of these were answered in the affirmative and he confirmed he had read the posters and brochures. Also an inmate who is deaf was interviewed. This inmate can read lips but has also been afforded the opportunity to use the TTY phone system that the jail possesses. Interviews with line level staff were aware of how to communicate and the necessary steps to take when dealing with an inmate who has disabilities or limited English Profeciency. The dention center also uses a language line for interpretation of other languages if needed.

Standard 115.17 Hiring and promotion decisions

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

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

The auditor was provided the Requirements for Licensed Texas Law Enforcement Careers as of 2/24/2011

This document states that in order to become a licensed as a peace officer or county jailer in Texas there are three requirements:

- 1. Successful completion of the basic licensing course;
- 2. Passing the state licensing examination; and
- 3. Appointment by a law enforcement agency

There are also minimum enrollment requirements for training as a Texas Peace Officer or County Jailer designated in the Commission Run 215.15.

In the BCDC PREA policy 2014-0812 it states:

Brazos County Sheriff's Office shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contract or 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 42U.S.C 1997), has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt of implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; has been civilly or administratively adjudicated to have engaged in the activity described in the above section.

The policy states that the Brazos County Sheriff's Office shall consider any incidents of sexual harassment in determining whether to hire anyone or to enlist the services of a any contractor who may have contact with the inmates.

Before hiring a criminal background records check will be performed and will 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. Criminal background checks will be done on all employees every 5 years.

Potential employees are asked to report these items in the Personal History Statement that is very detailed. Potential employees are told that omission of any details when discovered are grounds for termination. The Brazos County Detention Center takes numerous steps to make sure they are selective in hiring staff who will be spending so much time with offenders.

Standard 115.18 Upgrades to facilities and technologies

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

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

In interviews with the Jail Administrator and the PREA Coordinator it was confirmed that all discussions of expansions or upgrades will and have taken place, incorporate protecting the inmates from sexual abuse. No immediate expansions or upgrades are planned, but this is discussed in the yearly staffing analysis in which the PREA coordinator attends and reports back to the Jail Administrator.

The auditor observed an up-to-date video recording system and learned that the system has sufficient storage, and is used for investigations if needed.

Standard 115.21 Evidence protocol and forensic medical examinations

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

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

The Auditor was provided and reviewed the Cooperative Working Agreement between the Brazos Count Rape Crisis Center and the Brazos County Sheriff's Office. This clearly details the responsibility of both parties. In interviews with the sexual assault center and the sexual assault nurse examiner at the hospital it was evident that protocol consistant with national standards are used to collect evidence. The hospital where the inmate would be transported has the SANE staff. The auditor also reviewed the Physical Evidence Handbook provided by the Texas Department of Public Safety which details sexual assault evidence collection. The investigator who would be assigned the case within the jail was aware of their responsibilities and it was confirmed that the investigation would transpire identically as if the sexual assault were outside of the jail. Interviews with the sexual assault center discussed the procedure for receiving calls from the jail on their hotline and the services that they provide. The BCDC PREA Policy (2014-0812) clearly states that anyone (staff, inmates, volunteers and visitors) can report sexual harassment privately through the Sexual Assault Resource Center.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

The BCDC PREA Policy (2014-0812) states that every report, complaint or allegation of sexual harassment/sexual abuse, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively. All investigations both criminally and administratively are handled throught the Brazos County Sheriff's Office. There is a close relationship between the detention staff and the Sheriff's office investigators because many of the current investigators began their career within the detention center. This along with the training they received regarding investigations of sexual assault within a confined setting proves to be most helpful with the cases that come before them.

During an interview with those assigned to investigate allegations of sexual abuse and sexual harassment it was clear that they knew the protocol, those who needed to be informed and that the alleged victim needed to be informed once the investigation was complete. During the past 12 months there have been 4 allegations of either sexual abuse or harassment and 1 of those was referred for criminal investigation. That 1 was determined to be unsubstantiated.

Standard 115.31 Employee training

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

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

BCDC PREA Policy (2014-0812) states that all employees who may have contact with inmates shall receive training on Brazos County Sheriff's Office zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities under agency sexual abuse and harassment prevention, detection, reporting, and response policies and procedures; Inmate's rights to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement; The common reactions of sexual abuse and sexual harassment victims; How to detect and respond to signs of threatened and actual sexual abuse; How to avoid inappropriate relationships with inmates; How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender nonconforming inmates and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. This training is also tailored to the gender of the inmate in which they will be supervising.

Interviews with staff regarding their training made it apparent that they had not had the opportunity to use the training first hand but it clearly made them aware of what to do if this was presented to them.

Review of the training documentation confirmed that all staff had been trained and through random interviews with staff it was apparent that the training they received, they were able to call upon. All staff knew of the seriousness of any allegation and knew that it was meant to be taken seriously.

Standard 115.32 Volunteer and contractor training

Exceeds Standard (substantially exceeds requirement of standard)

PREA Audit Report

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

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

Contractors were required to take the online course created by the National Institute of Corrections PREA. This course includes an online exam with a required score to pass the exam. The auditor was provided copies of their certificates and scores. There are 72 volunteers/contractors who have received training and information on PREA.

Random interviews with volunteers confirmed that they knew exactly how to handle the situation if an inmate reported to them that they were sexually assaulted or harassed. The volunteer interviewed who had been volunteering over 5 years at the jail had never had any inmate approach them with a concern of sexual harassment or sexual assault. During the audit, the Sargeant responsible for coordination of volunteers and contractors was interviewed. They discussed what information was shared with the volunteers/contractors and how is was perceived by those coming to work and volunteer in a prison. All professional visitors and volunteers are required to sign a form stating that they understand the zero tolerance policy, their responsibility to report, there will be no physical contact but a handshake. This form is signed and witnessed and kept on file. The auditor was asked to sign the document upon arrival and did so.

Standard 115.33 Inmate education

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

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

During the intake process inmates receive information explaining the agency's zero tolerance policy regarding sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Comprehensive inmate education on sexual assault, sexual victimization and sexual misconduct is provided during the orientation process. Information is provided about sexual abuse/assault including prevention/intervention, self-protection, reporting sexual abuse/assault and treatment and counseling services offered.

This information is conveyed through a brochure that all offenders receive, posters displayed throughout the facility and an orientation video that is played daily throughout the jail at certain times. The television on the common area is changed by the control room and this video is played.

During the past 12 months 9,607 inmates were given this information at intake.

Standard 115.34 Specialized training: Investigations

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

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

Eight investigators who could be assigned to work a sexual assault case within the detention center have taken and passed the NIC online course, PREA: Investigating Sexual Abuse in a Confinement Setting.

During an interview with an investigator who could be assigned to work a case at the jail, he acknowledged receiving the training specific to PREA requirements. The investigator was knowledgable that any case that appeared to be criminal would be referred for criminal prosecution. The investigator also acknowledged using a preponderance of evidence as the standard of evidence used to substantiate allegations of sexual abuse and sexual harassment.

Standard 115.35 Specialized training: Medical and mental health care

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

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

All 14 medical and mental health practicioners have received and passed the National Institute of Corrections on line course; PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting. Interviews with medical and mental health staff made the auditor aware that they were knowledgable of their role if an inmate shared with them that they had been sexually assaulted. None of the medical interviewed had the situation arise but they also were aware that if an inmate needed outside counseling for a prior sexual assault that the Sexual Assault Response Center was available.

Standard 115.41 Screening for risk of victimization and abusiveness

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

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.

Brazos County Detention Center has a Classification Interview Form that is used for all inmates who are going to be spending 24 hours within the jail. The classification officer and the inmate sign the document once it has been completed. Via a one-on-one interview with the classification worker the inmate is asked the questions to best determine whether he or she is to be housed. In the past 12 months there has been no request by an inmate to be placed in security confinement or any reason to place an inmate in security confinement due to information received from the PREA Risk Assessment. The direct supervision provided in the general population for men offers the opportunity for staff to closely monitor the inmates transition into life incarcerated in the jail. There has been no need to reevaluate an inmate at the jail after they have been there over 30 days but there is a mechanism and form in place if that situation arises.

100 percent of all inmates who are going to spend more than 24 hours from their time of intake are given a PREA Risk Assessment.

The Classification officer interviewed by the auditor was fully aware of the importance of the classification of inmates for a variety of reasons. Her length of time working for the prison had afforded her the opportunity to know some of the inmates when they came through intake again. This knowledge proved to be helpful in gaining the trust of the inmate when asking personal questions and asking them about their safety. The classification officer had not had any inmate who had refused to answer any questions but was aware that the inmate could not be forced to respond to the specific PREA risk assessment questions.

Standard 115.42 Use of screening information

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

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.

With direct supervision within the general population of the male inmates, it provides more opportunity to keep the inmates safe from victimization. All inmates can be watched and therefore makes it a safer task to assign inmates to a particular quad of a housing unit. The officer at the unit has the authority with their sergeant to make housing recommendations if an inmate does not seem to be adapting. The information gathered by classification helps to determine where the inmate should be placed when incarcerated.

Standard 115.43 Protective custody

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

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

Inmates determined to be 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 there is no available alternative means of separation from likely abusers. This is stated in the BCDC PREA Policy (2014-0812).

Within the last 12 months, there have not been any inmates placed in involuntary segregated housing for risk of sexual victimization.

In accordance with Department policy if an inmate were to be placed there they would have access to programs, privileges, education and work opportunites.

Through staff interviews it was determined inmates at high risk of sexual victimization are not placed in segregated housing. Because of the barracks design of the direct supervision living unit, the inmate is placed in an area clearly observed by the officer who is constantly in the unit.

Standard 115.51 Inmate reporting

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

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

The inmate has multiple ways to report a sexual assault or harassment or retailiation from a previous report. They can inform any staff person. They can call the Sexual Assault Resource Center hotline. The inmate's family or friends can contact the jail and report on their behalf.

Interviews with inmates proved that they clearly know how and who they can report to. There is a sexual abuse and harassment reporting agreement between the Sexual Assault Resource Center (SARC) and Brazos County Detention Center that the auditor reviewed. The SARC serves as the private entity who can and will take information about sexual abuse and harassment allegations from inmates, staff and the public.

Interviews with staff made the auditor aware that staff are knowledgable of who and how to report the information.

Standard 115.52 Exhaustion of administrative remedies

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

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.

XX Not Applicable

The Brazos County Detention Center states inmates shall not utilize the inmate grievance system to report sexual abuse by a staff member or inmate-on-inmate sexual contact, as defined in the Glossary of the policy. However, if an inmate files a grievance related to sexual abuse, the Grievance Officer shall reject the grievance and forward to the PREA Coordinator for tracking and investigation. The inmate will be notified of this action. All sexual abuse allegations received as a grievance would immediately be forwarded to appropriate investigators. An interview with the grievance coordinator confirmed that in the past 12 months he has received no inmate grievances of sexual assault or harassment.

Standard 115.53 Inmate access to outside confidential support services

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

PREA Audit Report

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

The Sexual Assault Resource Center serves as the confidential support services for those housed in the Brazos County Detention Center. Inmates have access to their hotline whenever the phones are available. The inmate does not have to be calling about a sexual assault within the prison. The inmate can call about any past sexual assault. In an interview with the sexual assault resource center, they have agreed to come to the jail if an inmate requests this. The jail has already discussed private and secure locations where the counselor could come and talk with the inmate.

Through random inmate interviews it was determined that many of the inmates were familiar with the victim services that are available for victims of sexual abuse. Inmates acknowledged having heard of SARC because they remember the brochure they received and the posters that are up in the facility.

Standard 115.54 Third-party reporting

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

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.

In the brochure and in the posters, it is published that the public can report on behalf of the inmate to the sexual assault resource center or to the detention center. Because of the pre-booking mission of the jail and the constant communication with families and friends calling on behalf of the inmate this third party communication is already being done just not reporting sexual assault or harassment. In interviews with the staff that might receive a call from a family member or friend they were very clear on their responsibility to document and pass on immediately to their supervisor.

Interviews with inmates showed that inmates were aware that a friend or family could make a report on their behalf.

Standard 115.61 Staff and agency reporting duties

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

Does Not Meet Standard (requires corrective action)

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

It is stated in the BCDC PREA Policy (2014-0812) that all reports and incidents of sexual assault will be investigated and documented immediately regardless of the source or whether received in writing or verbally. All details of the reports are considered confidential and shall not be revealed to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Interviews with staff of all ranks were very clear on this directive.

Through interviews with a random sample of staff, not just security, as well as interviews with medical and mental health staff, it was determined that all staff realize their duty to report any knowledge, suspicion, or information related to sexual abuse or sexual harassment. Staff are also required to report any retaliation towards any inmate or staff for reporting and any staff neglect that may have contributed to an incident or retaliation. Through the interview with the PREA Coordinator it was learned that he is responsible for monitoring if any retaliation towards inmates as it relates to the reporting of sexual abuse or harassment.

Standard 115.62 Agency protection duties

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

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

When staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action will be taken to protect that inmate.

During the pre-audit, the auditor was advised there have not been any instances where the facility discovered an inmate to be at risk of imminent sexual abuse.

Through interviews with staff at all levels, it was determined staff know to take immediate action to separate the alleged victim and abuser whenever it is determined an inmate may be at risk of imminent sexual abuse. The direct supervision would allow the officer to move the inmate to a closer bunk where the officer and camera could keep watch. The communication amongst all staff, and the desire to protect the inmates, was apparent as interviews were done and this topic was brought forth.

Standard 115.63 Reporting to other confinement facilities

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

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

The BCDC PREA Policy (2014-0812) states:

If the incident occured in another facility the Jail Administrator will notify the head of the other facility where the incident occurred within 72 hours. This notification shall be documented.

During the past 12 months, the facility has received no allegations of sexual abuse from other facilities.

Interviews with the classification officer allowed the auditor to learn they are aware to notify the PREA Coordinator if an inmate responds to the question in the affirmative that they have ever been sexually assaulted within a prison. In interview with the PREA Coordinator he will coordinate the communication with the Jail Administrator and the head of the facility where the alleged assault occurred.

Standard 115.64 Staff first responder duties

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

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

The BCDC PREA Policy (2014-0812) addresses the responsibilities of the first responder

The first responder at the incident where there is a sexual assault or upon receiving information that there has been a sexual assault shall immediately separate the alledged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, the alleged victim will be instructed by the first responder not to take any actions that could destroy physical evidence such as eating, brushing teeth, changing clothes, urinating, defecating or drinking.

Report all information to Sargeant upon arrival.

Through interviews with random staff and officers who are assigned living units, it was determined staff know to separate the victim from the abuser as well as how to preserve evidence. Staff are aware to keep information related to sexual abuse investigations confidential. Many of the staff interviewed had not been required to perform the task because there had not been any incidents but they were aware of the process because of repeated training and discussions in shift briefings. In the past 12 months there has been one allegation that an inmate was sexually abused. A review of this case proved to be unsubstantiated.

Standard 115.65 Coordinated response

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

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

The BCDC PREA Policy (2104-0812) states "Ensure that inmates are seen by medical and mental health staff as needed according to the sexual assault. Medical would notify the hospital that an inmate was being transported for a sexual assault exam.

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

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

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

XX Not Applicable

This standard is not applicable because Brazos County Detention Center is not in a collective bargaining with any entity.

Standard 115.67 Agency protection against retaliation

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

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

The BCDC PREA Policy (2014-0812) states:

Classification, for at least 90 days following a report of sexual abuse, shall coordinate with the PREA Coordinator to 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 retaliation by inmates or staff, and acts promptly to remedy any such retaliation. Any inmate disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff shall be taken into consideration when monitoring for retaliation. The PREA Coordinator shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Classification shall use the PREA reassessment form and the PREA calendar to aid in this monitoring.

During the past 12 months, there have been no incidents of retaliation reported.

Through interviews with the classification officer and the PREA coordinator they are aware of their duties to ensure that no inmate or staff is retaliated against.

Standard 115.68 Post-allegation protective custody

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

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

The BCDC PREA Policy (2104-0812) prohibits inmates being placed in involuntary segregated housing if they have been deemed high risk for sexual victimization unless there is no alternative to insure the safety of the inmate. If the inmate is placed in segregated housing he should have access to programs and privileges, education and work opportunities. The jail will document if any of these opportunities have been limited and the inmate would be reviewed every 30 days to learn if removal

from segregation was possible.

During the past 12 months, there have been no instances where an inmate was placed in involuntary segregated housing awaiting completion of an assessment.

Through interviews with staff, it was learned that inmates who who might allege to have suffered sexual abuse or are at risk of sexual victimization would not be placed in involuntary segregated housing. These inmates would be placed in a suitable general population pod and would be closely monitored by the officer assigned to that pod.

Standard 115.71 Criminal and administrative agency investigations

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

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

The BCBS PREA Policy (2014-0812) states that the Internal Affairs Investigator will maintain files on all completed administrative investigations and will coordinate with the PREA Coordinator to ensure all cases of reported sexual abuse/assault are tracked properly. It is the responsibility of all supervisory staff members who receive a complaint of sexual assault to ensure that a report is made and that it is forwarded to the Security Lieutenant and Internal Affairs.

Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

Since August 20, 2012, there have not been any substantiated allegations of conduct that appear to be criminal that were referred for prosecution.

Standard 115.72 Evidentiary standard for administrative investigations

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

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

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

The BCDC PREA Policy (2014-0812) states that the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual harassment/sexual abuse are substantiated.

Interview with investigator indicated a preponderance of evidence is used when determining whether to substantiate allegations of sexual abuse or sexual harassment. This was confirmed that it is the same for cases investigated on the street.

Standard 115.73 Reporting to inmates

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

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

Inmates who make an allegation of sexual abuse while incarcerated shall be informed verbally or in writing as to whether the allegation has been substantiated, unsubstantiated or unfounded within 90 days. All written reports pertaining to the abusers administrative or criminal investigation shall be retained for the entire length of stay or employment of the abuser plus five years.

In the past 12 months there has been one investigation of sexual abuse that was completed by the agency. The auditor observed the documentation that the inmate was notified of the outcome of the investigation and interviewed the investigator regarding the case.

Standard 115.76 Disciplinary sanctions for staff

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

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

Supervisor receiving complaint of staff sexual misconduct will conduct a preliminary investigation and document the complaint. The preliminary investigation and complaint will be forwarded to the the Security Lieutenant and to the Internal Affairs Office.

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, are reported to law enforcement agencies, and to any relevant licensing bodies.

In the past 12 months there have been no allegations of staff sexual misconduct.

Standard 115.77 Corrective action for contractors and volunteers

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

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

When an allegation is made involving a contractor or volunteer, this information is forwarded to the security lieutenant who will determine disposition of contractor/volunteer while the investigations takes place.

During the past 12 months, there have not been any contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

Staff interviews indicate that any contractor or volunteer suspected of sexual abuse or sexual harassment would be removed from the building and prohibited from contact with inmates. Any contractor or volunteer found to have committed a major policy violation would be banned from the facility. Criminal charges would be filed when appropriate.

Standard 115.78 Disciplinary sanctions for inmates

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

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

Inmates shall be subject to disciplinary sanctions pursuant to the 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.

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.

A reporting inmate may only be subjected to discipline if the report is determined to be unfounded with proven malicious intent at the conclusion of a full investigation.

The detention center prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department will not deem such activity to constitute sexual abuse if the agency (through the investigative process) determines that the activity is not coerced or forced.

During the past 12 months, there has been no criminal or administrative finding of inmate-oninmate sexual abuse that has occurred at the facility.

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

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

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

All inmates will receive a mental health screening, which shall include a review of any history of sexual abuse, victimization, or sexual offenses committed by the inmate. Mental Health staff will counsel as necessary and ensure that Classification is notified if any housing changes are needed for the safety of the inmate(s).

During the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

During the past 12 months, 100% of inmates who have previously perpetrated sexual abuse were offered a follow-up meeting with a mental health practitioner.

Interviews with medical and with classification showed that they both work closely to ensure that an inmate is housed in the appropriate area with the information they are provided by the inmate.

Standard 115.82 Access to emergency medical and mental health services

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

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

BCDC PREA Policy (2014-0812) states:

Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgement.

The inmate victims of sexual abuse 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.

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.

Through various staff interviews, it was discovered inmate victims of sexual abuse would receive timely and unimpeded access to emergency treatment and crisis intervention services. If the abuse occurs within 96 hours, the inmate would immediately be taken down to medical to receive stabilization treatment and would then be transferred to the hospital. Inmates receive treatment based on the medical and/or mental health staff's professional opinion. Victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

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

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

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

The BCDC PREA Policy (2014-0812) states that inmate victims of sexual abuse while

incarcerated must be offered timely information about and timely access to, emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. Inmate victims must als receive comprehensive information about, and timely access to, all lawful pregnancy-related medical services, when relevant.

Interviews with the medical staff, although they had never had to send an inmate out for a sexual assault exam they were fully aware of what their policy states and their responsibility. They will provide to the inmates what would be afforded to him/her if they were not housed in the detention center.

Standard 115.86 Sexual abuse incident reviews

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

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

BCDC shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation was determined to be unsubstantiated. No review will be required if the allegation was determined to be unfounded. This review will occur within 30 days of the conclusion of the investigation. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical and mental health practicioners. The review team shall consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse. The review team will consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification, status or perceive status; or gang affiliation; or was motivated or otherwise cause by other group dynamics at the facility. The team will examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. The team will assess the adequacy of staffing levels in that area during different shifts. The team will assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Following this meeting a report will be prepared of all of the findings with recommendations for improvement and will be submitted to the Jail Administrator by the PREA Coordinator. If recommendations have been made a response from the Jail Administrator to the PREA coordinator implementing the recommendations or document reasons for not doing so.

During interviews with the investigator, PREA coordinator, and Facility Director; the importance of sharing this information following an incident was stressed. Because of the lack of allegations within the facility there has not been a need for the incident review committee to form and meet.

Standard 115.87 Data collection

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

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

The BCDC PREA Policy states (2014-0812) that all complaints of sexual assault and the outcomes of any investigation will be reported to the PREA coordinator for tracking purposes. Sexual abuse data will be made available annually through the agency website. These records will be kept secure and maintained for ten years. The auditor reviewed the agency website. In the interview with the PREA Coordinator it was explained how the data was stored and saved thus making it secure for 10 years.

Standard 115.88 Data review for corrective action

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

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

The Brazos County Detention Center has had so few incident of sexual abuse and sexual harassment within the last 12 months and longer it is difficult to track any trends. During interviews with the facility head and the PREA Coordinator they understand the importance of tracking and documenting so that this data is available for the public to view. All personal information regarding staff or inmate(s) would be redacted.

Standard 115.89 Data storage, publication, and destruction

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

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

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

Through interviews with the Facility Director and the PREA Coordinator, it was determined sexual abuse data will be submitted to the agency when it occurs. This data is retained on secure servers that are backed up.

AUDITOR CERTIFICATION

I certify that:

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

John Barkley

07-31-17

Auditor Signature

Date