PREA AUDIT: AUDITOR'S SUMMARY REPORT
ADULT PRISONS & JAILS

Name of facility: Billy Moore Correctional Center

Physical address: 8500 FM 3053 North, Overton, Texas 75684

Date report submitted: 20 August, 2014

Auditor Information

Jack Falconer
Address: P.O. Box 72673, Phoenix, Arizona 85050
Email: jfalconer1@cox.net

Date of facility visit: 13-14 August, 2014

Facility Information

Facility mailing address: (if different from above)

Telephone number:

☐ Military ☐ County Federal
☐ Private for profit ☐ Municipal ☐ State
☐ Private not for profit

Facility Type: ☐ Jail ☒ Prison

Name of PREA Compliance Manager: Dianna Riggs

Email address: Dianna.Riggs@mtctrains.com

Agency Information

Name of agency: Management and Training Corporation

Governor authority or parent agency: (if applicable)

Physical address: 500 North Marketplace Drive, PO Box 10, Centerville, Utah 84014

Mailing address: (if different from above)
AUDIT FINDINGS

NARRATIVE:

The PREA audit of the Billy Moore Correctional Center (BMCC) was conducted on August 13-14, 2014. The BMCC is a 500 bed, minimum/G2 custody level security prison operated by the Management & Training Corporation (MTC) for the Texas Department of Criminal Justice (TDCJ). It is located just outside Overton, Texas, 16 miles northwest of Henderson, Texas.

It is the mission of Management Training Corporation (MTC) to "Be a leader by: implementation of our plan to achieve high performance standards and goals; Maintaining a foundation based on integrity, accountability, and excellence; Providing long-term growth and stability while ensuring fiscal responsibility; creating opportunities through a positive environment for personal growth and development; empowering employees to implement innovative ideas for continuous improvement; Building esteem and pride by celebrating our diversity and accomplishments".

It is the mission of the Billy Moore Correctional Center (BMCC) "to provide public safety, provide a safe and secure facility for staff, offender, and visitors, promote positive change in offender behavior through education and rehabilitation, and to successfully reintegrate offenders back into society".

It is the mission of the Texas Department of Criminal Justice (TDCJ) “to provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime.”

On the first day of the audit, an entrance meeting was held where introductions were made. The following staff was in attendance:

Debbie Bell, Warden
Wade Colley, Major
Dianna Riggs, Lt., PREA Mgr.
Lee Latham, Captain
Monica Sessions, Sgt
Kevin Allen, Accreditation Manager
Kenneth Gaston, TDCJ Deputy Director of Operations Monitor
Chris Carlson, TDCJ Regional Supervisor
Carl Nink, MTC Director of Policy and Audits
Patricia Rohde, TDCJ Monitor

The auditor briefed the group on the audit process and responded to questions.

After the entrance meeting, a tour of the offender housing, program areas, food service, medical, recreation, and other areas required by the PREA guidance was conducted.

Facility Description

The Billy Moore Correctional Center is a privately managed adult correctional facility operated by the Management and Training Corporation. Pursuant to a service contract with the Texas Department of Criminal Justice, the facility provides housing for up to 500 minimum custody offenders.

The facility consists of a single structure which was constructed in 1995. The physical plant includes six general population dormitories designated as Dormitories A through F. Each dormitory contains 42 double occupancy cells. There is also a short-term segregation unit which contains nine single occupancy cells. The cells have lav/commodities in the cell. The showers have privacy screens and the detention cells have attached recreation spaces.

The remainder of the physical plant provides space for administrative offices, maintenance, food service, indoor and outdoor recreation, educational services, library services, religious services, property and intake processing, and a central laundry. A Control Center monitors all traffic entering and exiting the facility. Cameras control the perimeter and are placed in the facility to monitor the security and to open doors. The facility has two entry points, the front staff and visitor entrance and the rear wire gate for vehicles.

The entire grounds are well manicured with beautiful trees, plants and flowers. The Correctional Officers provide security supervision.

The facility has a variety of rehabilitative programs that are offered to the offender population. These include Academic programs, vocational programs, Life Skills programs, Career and Technical programs, and Religious Programs.

The academic program offered include ABE I/II, and GED.

Vocational programs include electrical, painting, custodial maintenance, basic computer literacy, blueprint awareness, Driver's Preparation, and Keyboarding.

The facility held two graduations during the past year. They reported 26 GED graduates, 35 Vocational Electrical graduates, 35 Painting and Décor graduates, 11 Vocational Computer graduates, and 19 custodial Maintenance graduates.

Self-improvement programs (Life Skills) include 7th Hour Power classes; Cage your Rage/Anger Management, Changes, Challenge series, Inside Outs Dads, Alcohol and Drugs, and The Kid and CEO. The facility reported that 290 offender students received certificates in these programs in the past year.

Religious Programs include the Institute of Self Worth, Faith Foundations, and various Sunday school and religious services. The facility reported 30 volunteers assist in the religious program.
Offenders incarcerated at the BMCC are afforded the opportunity to participate in work programs in most of the operational areas of the facility.

Billy Moore Correctional Facility is accredited by the American Correctional Association.

During the two day on-site audit, the auditor toured the facility, examined additional documentation, and conducted formal staff and offender interviews.

12 Offenders from the housing units, 14 Specialized Staff, 4 Management Staff, and 11 Correctional Officers were interviewed using the questions provided in the audit documents. The staff and the offenders were eager to answer all questions.

The Pre-Audit document provided by the facility indicated zero allegations of staff sexual abuse and nine offender allegations of offender sexual abuse. All of the allegations were investigated and determined to be unfounded or unsubstantiated.

The interviewed offenders and staff indicated that the BMCC facility was a safe place to serve time and to work. There were few complaints from the offender population or the facility staff.

In this auditor’s opinion, the Billy Moore Correctional Center was well managed and the staff was well trained in their assignments.

On Wednesday, an exit meeting was conducted by the auditor. The attendees were:

- Debbie Bell, Warden
- Wade Colley, Major
- Dianna Riggs, Lt., PREA Mgr.
- Kevin Allen, Accreditation Manager
- Lee Latham, Captain
- Monica Sessions, Sgt
- Kenneth Gaston, TDCJ Deputy Director of Operations Monitor
- Chris Carlson, TDCJ Regional Supervisor
- Carl Nink, MTC Director of Policy and Audits
- Patricia Rohde, TDCJ Monitor

The auditor provided an overview of the audit results and congratulated the facility staff about the progress made in compliance with the PREA standards.
**DESCRIPTION OF FACILITY CHARACTERISTICS:**

<table>
<thead>
<tr>
<th>Facility Demographics</th>
<th>Billy Moore Correctional Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designed Capacity:</td>
<td>513</td>
</tr>
<tr>
<td>Actual Population (8/5/14)</td>
<td>500</td>
</tr>
<tr>
<td>Security/Custody level:</td>
<td>Minimum</td>
</tr>
<tr>
<td>Gender</td>
<td>Adult Male</td>
</tr>
<tr>
<td>Age Range</td>
<td>20-76</td>
</tr>
<tr>
<td>Average length of Stay</td>
<td>301.5 days</td>
</tr>
</tbody>
</table>

**Number of full time staff:**

- Administration: 9
- Security: 68
- Programs: 10
- Support: 10
- Total Facility (BMCC staff): 97
- Medical (Contract-UTMB): 9

**SUMMARY OF AUDIT FINDINGS:**

- Number of standards exceeded: 0
- Number of standards met: 40
- Number of standards not met: 0
- Number of standards not applicable: 3 (115.12, 115.14, 115.66)
- Total: 43
§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

The Billy Moore Correctional Center (BMCC) and Management Training Corporation (MTC) have policies that mandate a zero tolerance for sexual abuse and sexual harassment of their offender population. The policies also present a plan to address prevention, detection, and responses for all employees. The agency (MTC) employs a full time PREA Compliance Coordinator and the facility (BMCC) assigns a Lieutenant as the PREA Manager. Both have sufficient time to address the needs of PREA.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Not applicable

BMCC is not a public agency. The facility is operated by the Management Training Corporation (MTC). The MTC policy is to ensure full compliance with the PREA requirements.

§115.13 – Supervision and Monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

The BMCC has developed a staffing plan to safely meet the PREA and correctional needs. This plan involves always filling a list of mandatory positions to meet the necessary post staffing requirements when vacancies occur. The facility reported no deviations from the custody staffing plan for the past 12 months. Unannounced rounds are conducted for all shifts and recorded by senior management staff. A review of the staffing plan was documented. The Auditor examined direct contact correctional staff vacancy rates for the period January 2012 thru August, 2014. The correctional staff vacancy rate for this period averaged 12.97%. The facility used overtime to meet a safe staffing mandate required by TDCJ.
§115.14 – Youthful Inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Not Applicable- No offender is under 18 years of age at BMCC.

§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)

BMCC and MTC have policies that do not permit cross-gender body cavity or strip searches except in emergencies. The policy was confirmed by the staff and offenders interviewed. The facility reported zero instances where these types of searches had occurred. All showers and commode areas have curtains or protective screens. Opposite gender staff is required to announce their presence when entering the unit. Policies are in place to prevent staff (other than medical) to examine an offender solely for the purpose of determining gender. The facility reported zero instances where these types of searches have occurred in the past 12 months. 100% of the staff has been trained in the correct procedure for searches.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

The facility provides a variety of ways to ensure offenders with disabilities or limited English are provided the opportunity to understand PREA. Orientation videos, pamphlets, booklets, etc. are available. Interpreters are under contract to provide any needed service. Offender interpreters are prohibited.
§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)

BMCC has an on-site HR position that manages the recruitment and hiring process. Background checks are requested by the HR manager and completed by the Texas DCJ Central Office. Review of MTC/BMCC policy and interviews of the on-site HR manager verified that the facility follows the PREA requirements. All contractors are screened by using the same process. The MTC policy requires a 5 year re-check of employees and contractors. This was verified by review of the documentation and the interview process. Agency policy does indicate that any employee misconduct or false reporting is subject to the possibility of termination of employment.

§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)

BMCC/MTC policy requires that any modification or expansion of existing facilities will consider the modifications impact upon the facilities ability to protect the offenders from sexual abuse. The facility is owned by TDCJ. BMCC has requested TDCJ approval of a major work request to replace or repair a number of the cameras that are a part of the TDCJ facility. The auditor would encourage approval of this much needed request. The facility was also in need of a fix to the problem of inmate tampering of the cell door locks. The BMCC was in the process of seeking approval to fix this problem. Again, the auditor would recommend approval of this request.
§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)

Per BMCC policy, the facility is responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the Texas Department of Criminal Justice, any allegation involving sexual abuse or criminal activity requires that the TDCJ OIG be notified immediately to assume control of the investigation. The investigators for the facility are properly trained and meet the requirements of PREA.

The facility has an MOU with SAFE and SANE examiners using an outside health care provider. The facility conducted zero SAFE/SANE and Forensic examinations during the last 12 months. Victim advocates to provide outside services are under contract and the Chaplin is trained to provide advocacy services if required.

§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)

Per BMCC policy, the facility is responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the Texas Department of Criminal Justice, any allegation involving sexual abuse or criminal activity requires that the TDCJ OIG be notified immediately to assume control of the investigation. The investigators for the facility are properly trained and meet the requirements of PREA.

During the 12 month period (2013-2012, 9 allegations of sexual abuse and sexual harassment were received. All nine of the allegations were investigated and three were referred for criminal investigations. All of the allegations were found to be either unfounded or unsubstantiated.

Agency (MTC) policy regarding allegations of sexual abuse/harassment investigations is published on www.mtc TRAINS.com
§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)

All BMCC employees, contractors and volunteers, are trained to meet the PREA standards. The facility has a comprehensive training program which includes pre-service and annual in-service training and is tailored to meet the gender needs of the facility. The training documentation includes a signature roster that indicates the trainees understand the training presented. The interview process documented that employees understood the materials presented.

§115.32– Volunteer and Contractor Training

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

41 volunteers and contactors at BMCC were trained about PREA and correctional requirements during the last 12 months. Signatures documented that they understood the training presented.

§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)

In the past 12 months, 464 offenders were trained on the principals of PREA. This represented 100% of both the offenders in the facility prior to August 12, 2012 and those offenders that were received since August 12, 2012. Provisions are made to assist those offenders with disabilities or those not proficient in English to ensure their understanding of PREA. Orientation videos, posters, inmate handbooks, etc. are readily available to the population. The offender interviews indicated that they understood their rights under PREA.
§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)

Per BMCC policy, the facility is responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the Texas Department of Criminal Justice, any allegation involving sexual abuse requires that the TDCJ OIG be notified immediately to assume control of the investigation. The BMCC investigators are properly trained and meet the requirements of PREA.

§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)

All of the Medical and Mental Health services staff has been trained in the requirements of PREA. Forensic examinations are not conducted by the medical staff. These exams, if needed, are provided by a certified local health care organization.

§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).

100 % of the 464 offenders received by BMCC were screened for the risk of sexual abuse victimization or sexual abuse towards other offenders. This screening is accomplished within the first 72 hours of arrival. The risk assessment document is an instrument that meets the PREA requirements. The risk level is reassessed if warranted within the time frames required. The facility reported 464 reassessments were performed in the past 12 months.
§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)

The information obtained in the offender screening process is used to make individualized determination to ensure the offenders safety. This documentation is also used to make decisions to place each offender in appropriate housing, work, education, and program assignments.

§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)

The MTC/BMCC policies govern the use of segregation housing. These policies include looking at alternatives for victims of sexual abuse. The facility reported three offenders were held in segregation in the past 12 months for the purpose of protecting a possible sexual abuse victim. Policies require a review every 30 days for any offender in segregation.

§115.51 – Inmate Reporting

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

The facility has several ways that an offender can report sexual abuse/harassment. They can report an incident to any staff person, write a grievance or report, write letters, or notify a third person. No offenders are held for civil immigration purposes at the facility. Offender and staff interviews confirm that the process is well understood.
§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)

BMCC has an offender grievance process that meets the requirements of PREA. The process allows the offender to file an informal written complaint/grievance about sexual abuse or any correctional issue. The complaint can be filed with any staff and will be directed to the Warden for response if necessary. The Offender Handbook clearly outlines the process required. In the past 12 months, there was zero complaints or grievances filed concerning sexual abuse or harassment.

§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)

The facility provides to the offenders, confidential access to outside victim advocates by providing the name of the organization, toll free telephone number, posters, and the information is in the offender handbook. The facility has also trained the Chaplin to provide these services if needed.

§115.54 – Third-Party Reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

The agency has a website (mtctrains.com) that provides the opportunity for third party reporting of sexual violence. The website also provides the reporting policies regarding any sexual violence.
§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)

MTC/BMCC policies require all staff to immediately report any incident of sexual abuse/harassment. The policy also addresses the need to maintain confidentiality. The policies address possible retaliation. Senior management staff has been assigned the task to monitor possible retaliation and the monitoring is recorded.

§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)

The MTC/BMCC policies require all staff to immediately take steps to protect an offender who is the subject of imminent sexual abuse. There has been one incident of this action being required in the past 12 months.

§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)

MTC/BMCC policy requires the notification of another facility when they learn of an offender being sexually abused at that other facility. This notification is done within the 72 hour time frame. Documentation is required that the report will be investigated and properly acted upon. In the past 12 months, the facility reported zero allegations of sexual abuse that offender received at another facility.
§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)

Agency and facility policy meets all first responder requirements of PREA. This policy was verified by the responses from the staff being questioned. In the past 12 months, four allegations of sexual abuse from inmates were recorded. In three of these incidents, security staff responded as required.

§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)

A written institutional plan for a coordinated response to any incident of sexual abuse was available at the Billy Moore Correctional Center. The plan meets the requirements of both MTC and PREA.

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

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

Not applicable. The BMCC does not have a union.
§115.67 – Agency protection against retaliation

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

The facility has policies that protect offenders and staff from retaliation who report sexual abuse/harassment. Senior management supervises the plan. The facility reported zero instances of retaliation in the past 12 months.

§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)

Both the MTC and BMCC have policies in place that govern the use of involuntary segregation. These policies meet the PREA requirements.

§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)

Per BMCC policy, the facility is responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the Texas Department of Criminal Justice, any allegation involving sexual abuse or criminal activity requires that the TDCJ OIG be notified immediately to assume control of the investigation. The BMCC investigators are properly trained and meet the requirements of PREA. The facility reported zero cases of sustained allegations since 20 August, 2012. Written reports are developed per PREA & MTC requirements.
§115.72 – Evidentiary Standard for Administrative Investigations

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

The BMCC investigative unit indicates they use as a standard the preponderance of the evidence.

§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)

The BMCC and the TDCJ OIG conducts all investigations. In the past 12 months, 4 allegations from offenders were recorded. These allegations were investigated with the following results: 4 were unfounded or unsubstantiated. One required investigation by the TDCJ OIG. The offenders who filed allegations were informed of the results of the investigation. These reports are documented.

§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)

The MTC and BMCC have disciplinary sanctions for staff up to and including termination for violating sexual abuse/harassment policies. The facility reported zero cases of staff terminated or resigned for violating policies on sexual abuse/harassment.
§115.77 – Corrective action for contractors and volunteers

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

The MTC/BMCC has disciplinary sanctions for volunteers and contractors up to and including termination of contract for violating sexual abuse/harassment policies. The facility reported zero cases of volunteers/contractors terminated for violating policies on sexual abuse/harassment.

§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)

The MTC/BMCC has policies providing sanctions for offenders engaged in sexual abuse of another inmate. These sanctions meet the PREA requirements. Consideration is given to the offenders’ mental status in final determinations. Treatment is also offered to those found guilty. The agency has a policy that does not permit consensual sex between offenders. The facility reported zero cases of administrative or criminal findings of offender-on-offender sexual abuse in the past 12 months.

§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)

MTC/BMCC policy requires that all offenders who disclosed prior sexual victimization during initial screening be offered a follow-up meeting with medical or mental health. The meeting is required within 14 days of the initial screening. The same policy also applies to offenders who perpetrated sexual abuse. The facility reported that 100% of the offender meetings were met. Information found in the follow-up meeting is strictly limited to medical, mental health, security, and management staff. Informed consent is obtained by the medical staff.
§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)

The medical program at BMCC is staffed 8 hours per day, 7 days per week. All offenders who report to be sexual abused have unimpeded access to medical treatment. The community standard medical treatment includes proper medical care, treatment for sexual transmitted disease, and at no cost to the offender.

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

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

The facility provides medical and mental health evaluation and treatment consistent with the community standard for health care. These services are provided to all offenders who have been sexually abused. These services are at no cost. Offender abusers are also offered mental health evaluations within a 60 day period.

§115.86 – Sexual abuse incident reviews

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

The facility policy requires that all incidents of sexual abuse are thoroughly reviewed by an incident review team. This team includes the PREA Compliance Manager and several facility management staff. The reports are then reviewed by the Warden and MTC Administrative staff. The team is required to review and make recommendations within 30 days of the incident. The facility reported three sexual abuse investigations in the past 12 months.
§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)

MTC collects sexual abuse data from all of its facilities and compiles the data annually. The process followed meets the requirement of PREA.

§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 MTC collects sexual abuse data from all facilities and aggregates into an annual report. This report is available on the web at www.mtc.trains.com. The report is approved by the CEO of Management and Training Corporation.

§§115.89 – Data Storage, □ Publication, and • Destruction □

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

The MTC collects and securely retains data for a period of at least 10 years. This data is compiled from reports of all its facilities. This information is a public document and is readily available to the public.

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.

Jack Falconer  
Auditor Signature

20 August, 2014

Date