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





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Name of facility:	Diboll Correctional Center		
Physical address:	1604 South First Street, Diboll, Texas 75941		
Date report submitted:	23 January 2015 FINAL		
Auditor Information	n Jack Falconer		
Address:	P.O. Box 72673, Phoenix, Arizo	ona 85050	
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Telephone number:			
Date of facility visit:	14-15 January, 2015		
Facility Information			
Facility mailing address: (if different from above)			
Telephone number:			
The facility is:	☐ Military	☐ County	Federal
•	x□ Private for profit	☐ Municipal	x□ State
	☐ Private not for profit		
Facility Type:	☐ Jail	x Prison	
Name of PREA Comp	oliance Manager:		Title:
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Agency Information			
Name of agency:	Management and Training Corporation		
Governing authority or parent agency: (if applicable)			

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801-693-2600

Agency Chief Executive Officer

Name: Scott Marguardt Title: President and CEO

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Corporate PREA Coordinator

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number:

number:

AUDIT FINDINGS

NARRATIVE:

The PREA audit of the Diboll Correctional Center (DCC) was conducted on January 14-15, 2015. The DCC is a 518 bed, minimum (G1&G2) custody level security prison operated by the Management & Training Corporation (MTC) for the Texas Department of Criminal Justice (TDCJ). It is located in rural east Texas, in the town of Diboll. The facility is owned by the TDCJ.

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 **Diboll Correctional Center (DCC)** " to house TDCJ offenders in a safe, humane, cost-efficient, and appropriately secure institution and to provide necessary and appropriate medical, dental, and mental health services to offenders by professional staff and to provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens".

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:

David Driskell, Warden

Kenneth Montgomery, Major

Karen Walker, Sgt, PREA Mgr.

Steven Walker, Captain

Donna East, Case Manager

Maye Snider-Willis, Accreditation Manager

Jerry Bailey, TDCJ Monitor

Ganata Christian, Nurse Manager, UTMB

Carl Nink, MTC Director of Policy and Audits

Rogelio Pena, South Texas ISF, MTC

Misty Terrazas, Safe Prisons, Rufus Duncan Unit

Rhonda Maxie, Grievance/Safety, Rufus Duncan Unit

Beverly Petty, ACA, Rufus Duncan Unit

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 Diboll Correctional Center is a privately managed adult correctional facility operated by the Management and Training Corporation. Pursuant to a contract with the Texas Department of Criminal Justice, the facility provides housing for up to 518 minimum custody offenders.

The facility was opened in 1995. The physical plant is sited on 100 acres of property adjacent to the TDCJ Rufus H. Duncan Transfer Facility. The DCC provides two, 250 man housing units (2 man cell), and three ancillary buildings that have spaces for administrative offices, maintenance, food service, a gym for recreation, educational services, library services, religious services, property, intake processing, and a central laundry. There is also a short-term segregation unit which contains seven single occupancy cells. All cells have lav/commodes in the cell. The showers, located in the housing units, have privacy screens and the detention cells have attached recreation spaces.

A Control Center monitors all traffic entering and exiting the facility. Cameras are placed in the food service area and the segregation unit. The facility has two entry points, the front staff/visitor entrance and the rear wire gate for vehicles. The perimeter security consists of a single fence with razor wire.

The grounds are well manicured with 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 includes ABE 1, 2, & 3 plus a GED I & II. The facility reported that 39 offender students were enrolled in these programs in the past year.

Vocational programs include NCCER Carpentry Core, Texas A&M Landscape Design, Construction and Maintenance, & Facility Care. The facility reported that 65 offender students were enrolled in these programs in the past year.

The Horticulture program provides student offenders with the skills needed to learn cultivation of fruits, vegetable, flowers and plants. Utilizing both the classroom and the facility's front yard, these offenders gain valuable knowledge that may be utilized upon release.

The facility reported 15 GED graduates, 87% of the Facility Care completed the program, 76% completed the Carpentry Program, and 76% completed the Landscape Program. The facility reported offender attendance in all of the academic programs was in the high 90% range.

Self-improvement programs include; Changes I, Changes II, Toastmasters (AM & PM), and Life Skills. The facility reported that 82 offender students were enrolled in these programs in the past year.

The Religious Program is assigned one Chaplain to manage religious services for most faith groups and Sunday school. The facility reported 152 volunteers assist in the religious program. The Chaplain also runs pre-release programs for offenders to make their return to the community much easier.

Healthcare services are provided by contract between MTC/DCC and the University of Texas Medical Branch – Correctional Managed Care (UTMBCMC). Clinic hours are from 8:00 a.m.-4:30 p.m., seven days per week. The staffing for the medical program was 13.

Offenders incarcerated at the DCC are afforded the opportunity to participate in work programs in most of the operational areas of the facility. Diboll Correctional Center has an offender Community Service Work Squad. This squad is escorted into the community by correctional staff. This squad is utilized approximately 100 hours per month cleaning highways, washing police vehicles, and maintaining the local ball park, police station, city waste station, City Civic Center, and cemetery.

Diboll Correctional Center 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.

10 Offenders from the housing units, 11 Specialized Staff, 8 Management Staff, and 10 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 one offender allegations of offender sexual abuse. The offender allegation was investigated and determined to be unfounded.

The interviewed offenders and staff indicated that the DCC 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 Diboll 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;

David Driskell, Warden

Kenneth Montgomery, Major

Karen Walker, Sgt, PREA Mgr.

Steven Walker, Captain

Donna East, Case Manager

Maye Snider-Willis, Accreditation Manager

Jerry Bailey, TDCJ Monitor

Carl Nink, MTC Director of Policy and Audits

Mike Bell, MTC Regional VP

Edda Cantor, MTC Senior Director, Programs

Bruce Zeller, MTC Director

Oscar Mendoza, TDCJ Director

Billy Hirsch, TDCJ Deputy Director

Kenneth Gaston, TDCJ Deputy Director, Operations

Allison Dunbar, TDCJ Deputy Director

Paul Wilder, TDCJ Regional Monitor Spvr.

Shelia Moore, TDCJ

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:

Facility Demographics Diboll Correctional Center

Designed Capacity: 518

Actual Population (14 Jan, 2015) 516

Security/Custody level: Minimum (G1/G2)

Gender Adult Male

Age Range 19-77

Average length of Stay 271.58 days

Number of full time staff:

Administration 9

Security 96.7

Programs 11

Support 11

Total Facility (DCC staff) 127.7

Medical (Contract-UTMB) 13

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)
$X \square$ 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 Diboll Correctional Center (DCC), Management Training Corporation (MTC) and TDCJ all have policies that mandate a zero tolerance for sexual abuse and sexual harassment of their offender populations. The policies also present a plan to address prevention, detection, and responses for all employees. The agency (MTC) employs both a PREA Compliance Coordinator and an Assistant PREA Coordinator and the facility (DCC) assigns a Sergeant as the PREA Manager. All have sufficient time to address the needs of PREA.
§115.12 - Contracting with other entities for the confinement of inmate
☐ Exceeds Standard (substantially exceeds requirement of standard)

Not applicable

relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

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

§115.13 – Supervision and Monitoring □ Exceeds Standard (substantially exceeds requirement of standard) X□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) The DCC 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 used overtime to meet a safe staffing mandate required by TDCJ. 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 2014 thru December 2014. The correctional staff vacancy rate

§115.14 – Youthful Inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ 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

for this period averaged 6.7%.

No offender is under 18 years of age at DCC.

§115.15 – Limits to Cross-Gender Viewing and Searches

☐ Exceeds Standard (substantially exceeds requirement of standard)			
$x \square$ 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 Diboll Correctional Center has an all-male offender population.			
The DCC, MTC, & TDCJ all 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 areas have curtains or protective screens. Opposite gender staff is required to announce their presence when entering the units. 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)			
$x\square$ 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 in both English and Spanish. Interpreters are available to provide any needed service.

Offender interpreters are prohibited.

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§115.17 – Hiring and Promotion Decisions
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
DCC 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 TDCJ Central Office. Review of MTC/DCC 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 and TDCJ policies require a 5 year re-check of employees and contractors. This was verified by review of the documentation and in 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)
$x\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

DCC/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. DCC reported no modifications to the facility occurred during the rating period.

§115.21 – Evidence Protocol and Forensic Medical Examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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 DCC policy, the TDCJ Inspector General Office (OIG) is responsible for conducting criminal investigations. In accordance with their contract with the Texas Department of Criminal Justice, any allegation involving sexual abuse or criminal activity requires that the OIG be notified immediately to assume control of the investigation. Four DCC staff who have been trained to meet PREA standards will assist the OIG investigators.
The facility has an MOU with SAFE and SANE examiners using an outside health care provider. The facility conducted zero SAFE/SANE examinations during the last 12 months. Victim advocates to provide outside services are under contract and the DCC Chaplin and a Case Manager are trained to provide advocacy services if required.
§115.22 – Policies to Ensure Referrals of Allegations for Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Does Not Meet Standard (requires corrective action) Per DCC policy, the TDCJ OIG is responsible for conducting criminal investigations. 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. Four DCC staff are properly trained and meet the investigation requirements of PREA. The trained DCC staff would assist the OIG in criminal investigations if needed

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

☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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 DCC employees, contractors and volunteers, are trained to meet the PREA standards. In the past 12 months, 117 staff were trained. 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. The auditor was impressed with the staff responses in the interview process. They understand the PREA requirement very well.
§115.32- Volunteer and Contractor Training
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
12 volunteers and contactors at DCC were trained about PREA and correctional requirements during the last 12 months. Signatures documented that they understood the training presented. The volunteer that was interviewed was very knowledgeable about the requirements of the facility and PREA.
§115.33 – Inmate Education
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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, 661 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

§115.31 - Employee Training

§115.34 – Specialized Training: Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x\square$ 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 DCC policy, the OIG is responsible for conducting all criminal investigations. In accordance with MTC/DCC 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 DCC 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)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Documentation and the interviews indicated that all Medical and Mental Health services staff have 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)
$x\square$ 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 661 offenders received by DCC were screened for the risk of sexual abuse victimization or sexual abuse towards other offenders. This screening is accomplished within the first 24 hours of arrival. The risk assessment documents of MTC and TDCJ are instruments that meets the PREA requirements.
The offenders are reassessed for the risk of sexual victimization or being sexually abusive within the time frames required. The facility reported 661 reassessments were performed in the past 12 months.

MTC and TDCJ policies both prohibit discipline of an offender for refusing to answering questions in the screening process.

§115.42 – Use of Screening Information
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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. The placement decisions are made by a classification committee
§115.43 – Protective Custody
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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/DCC policies govern the use of segregation housing. These policies include looking at alternatives for victims of sexual abuse. The facility reported no 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)
$x \square$ 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. TDCJ has an Ombudsman that can be contacted to report any issues related to sexual abuse or harassment.

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)
$x\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
DCC and the TDCJ have 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 on 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 grievances filed concerning sexual abuse or harassment.
§115.53 – Inmate Access to Outside Confidential Support Services
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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 and a Case Manager to provide these services if needed.
§115.54 - Third-Party Reporting
☐ Exceeds Standard (substantially exceeds requirement of standard)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
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. The TDCJ Ombudsman also has a web site and mail addresses to allow third party reporting.

§115.61 – Staff and Agency Reporting Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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/DCC/TDCJ policies require all staff to immediately report any incident of sexual abuse/harassment. The policy also addresses the need to maintain confidentially. 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)
$x \square$ 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/DCC/TDCJ policies require all staff to immediately take steps to protect an offender who is the subject of imminent sexual abuse. There has been no 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)
$x\square$ 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/DCC/TDCJ 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)	
$x\square$ 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, one allegation of sexual abuse from an offender was recorded.	
§115.65 – Coordinated Response	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$x \square$ 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 Diboll Correctional Center. They will use the TDCJ plan to address the coordinated response requirements. 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 DCC does not have a union.	

§115.67 – Agency protection against retaliation
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x\square$ 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)
$x\square$ 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/DCC/TDCJ 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)
$x\square$ 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 DCC policy, the OIG is responsible for conducting criminal investigations. 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 DCC 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, and TDCJ requirements.

§115.72 – Evidentiary Standard for Administrative Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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 OIG investigator that was interviewed indicated they use as a standard the preponderance of the evidence.
§115.73 – Reporting to Inmate
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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 DCC and the TDCJ OIG conducts all investigations. In the past 12 months, 1 allegations from an offender was recorded. The allegation was investigated and was determined to be unfounded. The report was documented. The offender who filed the allegation was informed.
§115.76 – Disciplinary sanctions for staff
☐ Exceeds Standard (substantially exceeds requirement of standard)
$x \square$ 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, DCC, and TDCJ 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)
$x\square$ 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/DCC has disciplinary sanctions for volunteers and contractors up to and including termination of the 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)
$x \square$ 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/DCC/TDCJ have 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)
$x \square$ 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/DCC/TDCJ 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. There were zero offenders who required the follow-up meeting in the past

12 months. 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)
$x \square$ 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 DCC 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)
$x \square$ 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)
$x \square$ 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 one sexual abuse investigations in the past 12 months.

§115.87 – Data Collection	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$x \square$ 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 & TDCJ 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)	
$x\square$ 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 & TDCJ collects sexual abuse data from all facilities and aggregates into an annual report. This MTC report is available on the web at www.mtctrains.com. The report is approved by the CEO of Management and Training Corporation.	
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§§115.89 – Data Storage, Publication, and Destruction	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$x\square$ 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 _____ack =

23 January, 2015

Auditor Signature

Date