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





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Date report submitted:	8 October, 2014		. 0001	
Physical address	1100 Highway 1	807, Venus Texa	s 76084	
	Saunders Estes	Correctional Cer	iter	om pre-audit questionnaire]
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500 North Marketplace Drive, PO Box 10, Centerville, Utah 84014 Physical address: Mailing address: (if different from above) Telephone number: 801-693-2600 **Agency Chief Executive Officer** Scott Marquardt Name: Title: President and CEO **Email address:** scott.marquardt@mtctrains.com Telephone (801)-693-2800 number: Agency-Wide PREA Coordinator Name: Mark Lee Director, Corrections, Corporate Title: PREA Coordinator Email address: mark.lee@mtctrains.com Telephone (801)- 693-2864 number:

AUDIT FINDINGS

NARRATIVE:

The PREA audit of the Saunders Estes Correctional Center (SECC) was conducted on September 29-30, 2014. The facility is a minimum security prison operated by the Management & Training Corporation (MTC) for the Texas Department of Criminal Justice (TDCJ).

SECC has a holding capacity of 1040 offenders. It is located in Venus, Texas, approximately 20 miles south of the Dallas-Fort Worth Metro area.

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 **Saunders Estes Correctional Center (SECC)** "to protect the public by operating a safe, secure, and humane correctional facility. The mission is realized through effective supervision, proper classification, appropriate treatment of offenders, and by providing services that promote successful re-entry 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:

Randy Treon, Warden.

Terry Wiktorik, Deputy Warden.

Fred Tunaitis, Major

J. Brainard, ACA Manager

Dorothy Shufelt, Chief of Classification

S. VanLooy, Business Manager

Ken Gastons, TDCJ Deputy Director, PMOFD, TDCJ

Kristie Adams, Contract Monitor, TDCJ

Carl Nink, MTC Director of Policy and Audits

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

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

Facility Description

The SECC incarcerates adjudicated male offenders. The population is minimum custody offenders received from the Texas Department of Criminal Justice. Originally constructed and opened by TDCJ in 1989, it has been operated by a series of private prison corporations since opening. MTC has operated the facility since January, 2009.

The facility, located in Venus, Texas, consists of a 194,000 square feet structure on 100 acres of property. The construction of the building is tilt slab or concrete block walls and air conditioning. Twenty two dormitory style housing units provide spaces for 40 to 56 inmates in 2 person cells.

Ancillary spaces are provided for administration, food service, laundry, programming, warehouse, medical, recreation, library, visiting, commissary, religion, maintenance, and a Pre-Hearing Detention Unit.

The offender housing provides basic furnishings, shower facilities, and common TV areas. All showers have panels, shower curtains and screens to enhance privacy. The cells have lav/commodes in the cell, the showers have privacy screens and the detention cells have attached recreation spaces. The Correctional Officers provide security supervision.

The security perimeter consists of one woven wire fence with multiple rolls of razor ribbon wire. One armed vehicle patrols the perimeter 24/7. A Control Center monitors all traffic entering and exiting the facility. Cameras control the perimeter and are placed throughout 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 offender population is provided a large variety of program opportunities. These include the following;

Educational Programs include Adult Basic Education (ABE), Pre-GED, GED, and CHANGES II (Life Skills.

Vocational Programs include Building Trades (NCCER certified), Electrical Trades (NCCER certified), Commercial Housekeeping (Hill College), Computer Literacy (Hill College), and Culinary arts.

Correctional Programs include Dave Ramsey Financial Peace, English as a Second Language, In and Out Dads. Job Readiness, NCCER Core, Saunders Claus Wood Work Shop, and Serve Safe Food Processing.

A "Paws of Hope" program provides a form of rehabilitation for offenders in one of the SECC housing units. 6-10 dogs are trained by the offenders at any one time

At the time of the audit, 362 offender students were actively involved in the Education program (35 % of the total population). In 2013, SECC indicated that 78 GED certificates were awarded and SECC was the first Texas Prison School to offer computerized GED testing.

The religious program is coordinated by a full-time Chaplin. Over 134 hundred volunteers assist the Chaplin to deliver religious services to the offender population. A multi-purpose facility serves as the chapel.

SECC is fully 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. 11 offenders from the housing units, 13 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 zero offender allegations of offender sexual abuse.

The interviewed offenders and staff indicated that the SECC facility was a safe place to serve time and to work. There were no complaints from the offender population or the facility staff.

In this auditor's opinion, the Saunders Estes Correctional Center was well managed and the staff was trained and professional in their assignments.

On Tuesday afternoon, an exit meeting was conducted by the auditor. The Warden and 5 SECC staff were in attendance. In addition, the following were in attendance;

Ken Gastons, TDCJ Deputy Director, PMOFD, TDCJ

Kristie Adams, Contract Monitor, TDCJ

Carl Nink, MTC Director of Policy and Audits

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 Saunders Estes Correctional Center

Designed Capacity: 1040

Actual Population (9/29/14) 1033

Security/Custody level: Minimum

Gender Adult Male

Age Range 18-85 years

Average length of Stay 270 days

Number of full time staff:

Administration 14.0

Security 144.5

Programs 12.1

Support 19.0

Total Facility (MTC) 189.6

Medical (UTMB) 16.0

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 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 Saunders Estes Correctional Center (SECC), the Management Training Corporation (MTC), and the Texas Department of Criminal Justice (TDCJ) all 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 (SECC) assigns a Deputy Warden as the PREA Manager. All 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
SECC is not a public agency. The facility is operated by the Management Training Corporation (MTC) under contract with the TDCJ. The MTC policy is to ensure full compliance with the PREA requirements.
8115 12 - Supomision 184 - 1 - 1
§115.13 – Supervision and Monitoring
☐ 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 SECC 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. This is accomplished by the use of overtime and call-in of part-time positions. The facility reported no deviations from this 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. A review of the authorized position vacancies indicated a vacancy rate of 1.74% for calendar 2013 and

3.77% for 2014 (January-thru September).

§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) \square Does Not Meet Standard (requires corrective action) Not Applicable- No offender is under 18 years of age at SECC. §115.15 – Limits to Cross-Gender Viewing and Searches ☐ Exceeds Standard (substantially exceeds requirement of standard) x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) SECC has 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. There have zero instances where these 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□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) SECC 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

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□ Exceeds Standard	(substantially	exceeds	requirement of	of ctandard)
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 $x \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

SECC has an on-site Human Resources position that manages the recruitment and hiring process. Background checks are requested by the facility and completed by the Texas Department of Criminal Justice Central Office. Review of MTC/SECC policies 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 recheck 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

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Likeeus Standard (substantially exceeds	requirement of standard)add additional razor
wire to the perimeter fence,	razor
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 $x \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

 \square Does Not Meet Standard (requires corrective action)

SECC/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. In the past 12 months, SECC has made no upgrades to the facility. Since the facility is owned by the Texas Department of Criminal Justice, all improvements require their approval. Currently, the SECC has submitted funding requests to replace the video monitoring system, add additional razor wire to the perimeter fence, and to replace the smoke detector system. The requested improvements are important to the improvement of facility operations.

8115.21 - Evidence Protocol and Forensic Medical Examinations

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9115.21 – Evidence Protocol and Forensic Medical Examinations
□ 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)
Per SECC/MTC/TDCJ policy, the Texas Office of Inspector General is responsible for conducting investigations, both administrative and criminal. In accordance with the MTC contract with the TDCJ, any allegation involving sexual abuse or criminal activity requires that the OIG be notified immediately to assume control of the investigation. The OIG investigator at the facility is properly trained and meets the requirements of PREA.
The facility has an MOU with SAFE and SANE examiners using an outside health care provider. The SAFE/SANE provider (local hospital) agreement verifies that they are ready to provide services if needed. The facility conducted zero SAFE/SANE examinations during the last 12 months. Victim advocates are provided by two trained staff persons (Chaplin and Chief of Classification) and outside services are under contract.
§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)
Per SECC/MTC/TDCJ policy, the OIG, TDCJ, is responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the TDCJ, any allegation involving sexual abuse and criminal activity requires that the Office of the Inspector

allegation involving sexual abuse and criminal activity requires that the Office of the Inspector General, TDCJ, be notified immediately to assume control of the investigation. The OIG investigator at the facility is properly trained and meets the requirements of PREA.

During the 12 month period (2013-2014), 0 allegations of sexual abuse and sexual harassment were received.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period
☐ Does Not Meet Standard (requires corrective action)
All SECC employees, contractors and volunteers, are trained to meet the PREA standards. The facility has a comprehensive training program which includes pre-service and annual inservice 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. In addition, the Training Administrator has developed a unique testing process to verify that the trainees understand the training received. The interview process documented that employees understood the materials presented.
§115.32 – Volunteer and Contractor Training
□ Exceeds Standard (substantially exceeds requirement of standard)
X□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
All volunteers and contactors for SECC 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)
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)
In the past 12 months, 1101 SECC offenders were trained on the principals of PREA. SECC maintains documentation of offender participation in these training sessions. 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

§115.31 – Employee Training

rights under PREA.

§115.34 – Specialized Training: 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)
Per SECC/MTC/TDCJ policy, the OIG, TDCJ, is responsible for conducting investigations, both administrative and criminal. In accordance with the SECC contract with the TDCJ, any allegation involving sexual abuse and criminal activity requires that the Office of the Inspector General, TDCJ, be notified immediately to assume control of the investigation. The OIG investigator at the facility is properly trained and meets 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)
100% of the UTMB 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 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 1470 offenders received by SECC 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 MTC 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 zero reassessments were required in the past 12 months.

9113.42 - Use of Screening Information
☐ Exceeds Standard (substantially exceeds requirement of standard)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The information obtained in the offender screening process is used to make individualized determination to ensure their 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)
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 MTC/SECC policies govern the use of segregation housing. These policies include looking at alternatives for victims of sexual abuse. The facility reported zero use of segregation in the past 12 months for the purpose of protecting a 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 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, use a special PREA hot line, write letters, notify the TDCJ Ombudsman, 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)
$x\square$ 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 and SECC have an offender grievance process that meets the requirements of PREA. 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 have been 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)
$x \square$ 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. Agreements and an MOU are available. To ensure that the offenders have someone who can assist them to provide advocacy services, the facility has two of its staff trained to provide this service.
§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.

	§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/SECC 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☐ 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/SECC policies require all staff to immediately take steps to protect an offender who is the subject of imminent sexual abuse. There have been no incidents of this action being required in the past 12 months
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	§115.63 – Reporting to Other Confinement Facilities
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	☐ Does Not Meet Standard (requires corrective action)
	MTC/SECC 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 offender sexual abuse received from another facility.

9115.64 – Staff First Responder Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
x□ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
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, 0 allegations from inmates were recorded.
§115.65 – Coordinated Response
☐ Exceeds Standard (substantially exceeds requirement of standard)
x Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
A written institutional plan for a coordinated response to any incident of sexual abuse was available at the Saunders Estes Correctional Center. The facility adopted the TDCJ response plan to coordinate the response to an incident of sexual abuse. 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 Saunders Estes Correctional Center does not have a union.

§115.67 – Agency protection against retaliation
□ Exceeds Standard (substantially exceeds requirement of standard)
x☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
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 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 SECC have policies in place that govern the use of involuntary segregation. These policies do meet the PREA requirements.
§115.71 – Criminal and Administrative Agency 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)
Per SECC/MTC policy, the facility is not responsible for conducting investigations, both administrative and criminal. In accordance with their contract with the TDCJ, any allegation involving sexual abuse or criminal activity requires that the Office of the Inspector General, TDCJ, be notified immediately to assume control of the investigation. The SECC senior staff will assist the OIG investigator as needed. The OIG investigator at the facility is properly trained and meets the requirements of PREA. The facility reported zero cases of substantiated allegations since 20 August, 2012. Written reports would be developed per

PREA requirements.

PREA AUDIT: AUDITOR'S SUMMARY REPORT

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§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 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)	
$x\square$ 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 TDCJ OIG conducts all investigations. In the past 12 months, 0 allegations from offenders were recorded. Any offender who files an allegation will, by policy, be informed of the results of the investigation.	
§115.76 – Disciplinary sanctions for staff	
☐ 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 MTC and SECC 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/SECC 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)
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 MTC/SECC 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)
$x\square$ 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/SECC 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 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 the SECC is staffed 16 hours each 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.
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	§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
linante se se se	☐ 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 (requireş corrective action)
	The MTC/SECC 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 top 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 zero sexual abuse incidents in the past 12 months.

§115.87 – Data Collection
☐ 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)
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)
$x \square$ 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 sexual abuse data from all facilities and aggregates into an annual report. This report is available on the web at www.mtctrains.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)
$x\square$ 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 knowledge and no conflict of interest exists with respect to his ability to conduct an audit of the agency under review.
Jack Falconer Jack Jaleoner October 7, 2014
Auditor Signature Date