

**PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS**

Date of report: April 26, 2017

Auditor Information			
Auditor name: Adam T. Barnett, Sr.			
Address: Post Office Box 20381			
Email: Adam30906@gmail.com			
Telephone number: 404-683-6844			
Date of facility visit: March 28, 2017			
Facility Information			
Facility name: Giles W. Dalby Correctional Facility			
Facility physical address: 805 North Ave. F. Post, Texas 79356			
Facility mailing address: <i>(if different from above)</i> same			
Facility telephone number: 806-495-2175			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Stephen McAdams			
Number of staff assigned to the facility in the last 12 months: Click here to enter text.			
Designed facility capacity: 1921			
Current population of facility: 1833			
Facility security levels/inmate custody levels: low/medium			
Age range of the population: 20 - 26			
Name of PREA Compliance Manager: Dawn Guerrero		Title: Accreditation Manager	
Email address: dawn.bilberry@mtctrains.com		Telephone number: 806-495-2175 Ext. 287	
Agency Information			
Name of agency: Management and Training Corporation (MTC)			
Governing authority or parent agency: <i>(if applicable)</i> Management and Training Corporation			
Physical address: 500 North Marketplace Drive, Centerville, Utah 84014			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: same			
Agency Chief Executive Officer			
Name: Scott Marquardt		Title: President / CEO	
Email address: scott.marquardt@mtctrains.com		Telephone number: 801-693-2800	
Agency-Wide PREA Coordinator			
Name: Mark Lee		Title: Director, Corrections/Corporate PREA Coordinator	
Email address: Mark.lee@Mtctrains.com		Telephone number: 801-693-2864	

AUDIT FINDINGS

NARRATIVE

Methodology

The PREA audit of the Giles W. Dalby Correctional Facility (GWDCF), a facility operated by the Management and Training Corporation (MTC), was conducted on March 28 -29, 2017. The facility posted the required PREA audit notice of the upcoming audit sixty days prior to the audit for confidential communications. As of March 27, 2017, there were no communications from inmates or staff. The Pre-Audit Questionnaire was completed by the facility and sent to the auditor as required. The PREA compliance Manager/Coordinator confirmed that all information on the Pre-Audit Questionnaire is accurate.

The audit process was a team approach. The Audit Team completed a documentation review using the Pre-Audit Questionnaire, internet search, policies and procedures review, and additional documentation provided on the flash drive. The results of the documentation review were shared with the facility prior to and at the site visit. Phone conversations were conducted and emails exchanged with the facility.

The Audit Team consists of Adam T. Barnett, Sr. Certified Juvenile and Adult PREA Auditor and Latera Davis who served as an associate. Latera currently works as the Director of Victim and Volunteer Services for the Georgia Department of Juvenile Justice. She is a Licensed Clinical Social Worker, Certified Child Forensic Interviewer, Certified Victim Advocate, Certified Juvenile Sexual Offender Counselor, and is POST Certified, as well as a Certified Peer Grant Reviewer for the Department of Justice Programs.

On Tuesday, March 28, 2017 the entrance conference was held and attended by:

- Senior Warden
- Warden (Operations)
- Warden (Programs)
- Facility PREA Compliance Manager
- Medical (Lead)
- Medical
- Training
- Programs
- Executive Administrator
- Medical (Staff)
- Chaplain
- Human Resource
- Manager
- Adam Barnett, Lead PREA Auditor
- Later Davis, PREA Associate

Welcomes were given by the warden, and facility staff were introduced. The Lead Auditor and PREA Associate were introduced and the PREA Audit Agenda was reviewed and released. Additional pre-audit information requested weeks prior to on-site visit obtained.

Site Tour

On the first day of the audit after the entrance conference, the lead PREA Auditor toured the physical plant escorted by the Warden, Captain, PREA Compliance Manager and Training Officer. The Auditor spoke informally with 27 staff and 12 inmates during the tour which covered housing and common areas of the facility, day areas, programming areas, and shower and toilet areas. The Auditor noted video camera placement throughout the facility and reviewed the video monitoring setup in the control room areas. Notices of the PREA audit were posted throughout the facility as required by the Auditor.

During the tour of the physical plant, the Auditor observed the location of cameras, staff supervision of inmates, dorm layout including sleeping rooms and shower/toilet areas, placement of posters and PREA informational resources, security monitoring, inmate's movement procedures, and inmate's interaction with staff. The Auditor noted that shower and toilet areas allow inmates to shower ensuring their privacy from staff direct viewing. The auditor was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility.

The laundry room had cameras and no blind spots. The dining room has PREA information to include PREA posters. Cameras were located in the dining room as well as in all locations in the kitchen. Cameras were located in the Administration area, most of the office doors had the safety windows. Medical has cameras and PREA information, and ceiling mirrors to eliminate blind spots. The segregation Unit has a removable phone for inmates with PREA information posted on the phone. The gym and the recreation yard had cameras and inmates were well behaved during the tour.

Sampling Interviews and Staff Contact

The audit work plan was discussed, random samples of inmates and staff were selected, and specialized staff was identified. Agency and Facility staff selected for interviews included:

- Agency Head (Phone Interview was conduct with MTC President)
- Agency PREA Coordinator (Phone Interview was conduct with MTC Coordinator)
- Agency Assistant PREA Coordinator (On-site)
- Warden
- Facility PREA Compliance Manager
- BOP - Contract Monitor
- Higher Level Facility Staff (PREA Unannounced Rounds)
- Lead Medical Staff
- Lead Mental Health Staff
- Human Resources Administrator
- Volunteer
- Contractor
- Investigator
- Staff Conduct PREA Screenings
- Staff Supervise Inmate Segregated Housing
- Incident Review Member
- Staff Monitoring Retaliation
- First Responder (Non-Security Staff)
- First Responder (Security)
- Intake Staff
- Random Correctional Offices 1st Shift = 9
- Random Correctional Offices 2nd Shift = 9
- Random Correctional Offices 3rd Shift = 3
- Random Staff Met/PREA During Facility Tour = 27
- 6:45am Shift Briefing = 38

Three hundred and one (301) staff members were employed at the facility as of the March 29, 2017. Forty-one staff members were formally interviewed; the auditor interacted with twenty-seven (27) staff members during the facility tour, thirty-eight (38) officers were visited at their 6:45am shift briefing for a total Hundred-six (106) staff members.

Sampling Interviews and Inmates Contact

- Inmate Interview (one random from each housing pod) = 24
- Disabled - 1
- Limited English Proficient Inmates (use facility interpreter) - 7
- Transgender - 0

- Intersex Inmates - 0
- Inmates in Segregated Housing - 0
- Inmates who Reported Sexual Abuse - 1
- Inmates who Disclosed Prior Sexual Victimization - 1
- Gay or Bi-Sexual - 1
- Random Inmates Met/PREA During Facility Tour = 12

On March 28, 2017 inmate census reported the population count and the total bed capacity is 1833. The average length of the inmate stays during the audit period was 455 days. The age range of the population is 20 – 86. Twenty-four (24) inmates were interviewed. The auditor interacted with twelve (12) inmates during the facility tour for a total of thirty-six (36).

DESCRIPTION OF FACILITY CHARACTERISTICS

It is the mission of Management Training Corporation (MTC) to:

Be a leader by: implementation of our plan to achieve high performances standards and goals; maintain 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.

The Giles W. Dably Correctional Facility mission is to:

“Protect the public by operating an institution that is safe, appropriately secure, clean, and humane. We will be dedicated to creating opportunities through a positive environment for persona growth and development of both inmates and staff alike”.

Facility Accreditations

The facility has reported the following accreditations:

1. The educational program has been accredited by the Correctional Educational Association.
2. The facility has been accredited by the American Correctional Association (ACA).

Facility Background

The Giles W. Dalby Correctional Facility is a low/minimum security facility located in Post, Texas (Garza County) approximately 40 miles southeast of Lubbock, Texas. The institution opened in October of 1999 with a rated capacity of 1094. In November 2007, two additional housing units were constructed resulting in a new rated capacity of 1921.

Physical Plant

The physical plant consists of 12 buildings situated on 15 acres of land within the city of Post. The facility is owned by Garza County and is operated by Management and Training Corporation (MTC) through a contractual agreement to house criminal alien male inmates for the Federal Bureau of Prisons. Upon completion of their sentence, the majority of the inmates are released into the custody of the Immigration and Customs Enforcement for deportation.

There are six general population housing units containing double-bunked cells and dormitory pods. The Special Housing Unit (SHU) is located in “A” Building with 61 cells. The “A” building also has 64 double occupancy cells. “B” building and “C” building each have 4 pods of 32 double occupancy cells. The cells have lavatory/commodes in the cell, the showers have doors and the SHU has attached recreation spaces. The SHU Unit houses inmates in administrative and disciplinary segregation, protective custody, new inmates to the facility, and inmates within 30 days of their release.

“D” building has 24 double occupancy cells and 6 pods for dormitory type housing. “E” and “F” building each have 4 dormitory pods used for inmate housing. Each dorm unit provides basic furnishings, shower facilities, and common TV areas. All showers and commodes at Dalby Correctional Facility have panels; there are PREA “friendly” shower curtains and screens to enhance privacy.

The ancillary support structures provides spaces for administration, central control, visiting, food service, education, medical, commissary, maintenance, laundry, recreation, a large gym, warehouse, and a Chapel.

Security Supervision

The Correctional Officers provide security supervision. The security perimeter consists of two wire fences 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. Numerous 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.

Facility Demographics

- The facility's rated capacity = 1921
- Average Daily population during the audited period (past 12 months) = 455
- Actual population on the first day of the onsite audit = 1833
- Number of Males Housed = 1833
- Number of Females Housed = 0
- Number of Youthful Inmates Housed = 0
- Custody/Security Level in the facility = low/medium
- General Medical Services = On-site
- Mental Health Services = On-site
- Investigation = On-site

Programming Options

The Educational Programs include Adult Basic Education (ABE), General Educational Development (GED), English as a Second Language, and Mexican Adult Education (M.A.E.), Primaria and Secundaria. Vocational programs include Computer Skills, Computer Repair, Building Trades, Auto-Cad (Computer Assisted Drafting), and Electrical Trades.

Self-improvement programs include Financial Management (Dave Ramsey), Business Basics, DADS 101, thinking for a Change, Emotional Healing and Awareness, and Knowledge for Today, Strength for Tomorrow, Inmate Work Program, Substance Abuse and Alternatives to Addiction.

There are also recreational activities, religious, and social services available.

SUMMARY OF AUDIT FINDINGS

The Auditor conducted an exit conference with the agency and facility officials on Wednesday, March 29, 2017. Agency, facility officials and staff were very open and receptive to an honest discussion of areas where PREA compliance needs to be strengthened and the facility PREA compliance Manager began corrective action on each provision immediately. Present at the exit conference:

- MTC Agency Assistant PREA Coordinator
- Facility Warden
- Facility PREA Compliance Manager

The standards are rated as exceeded, met, not met or not applicable. Most standards have between 1 – 15 provisions. To achieve compliance on any given standard, the facility must achieve 100% compliance with each provision within the standard. The auditor used the Department of Justice Final Rule Prisons and Jail PREA Standards published in May 17, 2012. Forty-three (43) Prisons and Jail Standards were audited.

The PREA Compliance Manager was very knowledgeable about the PREA requirements and the implementation of processes and systems.

Specific detail about deficiencies and corrective actions regarding these findings appears in the standard-by-standard discussions in the main body of the report. The facility completed minor concerns within the 45 days before the auditor release the primary report will be reviewed as corrected as results will be note with each standard.

Number of standards exceeded: 1

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 3

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

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

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

This standard directs the agency to adopt a zero tolerance policy for sexual abuse and harassment.

Supporting Documents, Interviews and Observations:

- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1-2
- 903E.02 – Ensuring Safe Prisons – Pg. 1,6
- MTC Organizational Chart
- Corporate Employee Listing Re: PREA Coordinator
- Facility Organizational Chart (1/9/ 2016)
- Memo Re: Corporate PREA Coordinator (9/23/2016)
- Memo Re: Facility PREA Coordinator (8/26/2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility PREA Compliance Manager

Findings (By Provisions):

- (a) Management & Training Corporation (MTC) published the agency Policy Serial Number 903E.02, Ensuring Safe Prisons that mandates a zero tolerance toward all forms of sexual abuse and sexual harassment. The policy outlined the agency's approach to prevent, detect, and response to sexual abuse and sexual harassment. The agency policy outline is found in section F.2. (b) On page 6. The agency policy clearly defines general definitions and definitions of prohibited behaviors to include sexual abuse and sexual harassments.
- (b) Management & Training Corporation (MTC) policy Serial Number 903E.02 Ensuring Safe Prisons, designates an upper level PREA Coordinator for the company who has sufficient time and authority to develop, implement and oversee MTC's efforts to comply with the PREA Standards in all its facilities. The agency operates more than one facility; each of MTC's facility is required to designate a PREA Compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards.

MTC provided information from the Senior Vice President designating the senior director, management and operational support, as the MTC PREA coordinator. A phone interview with the PREA Coordinator confirmed he is knowledgeable of the PREA Standards and has sufficient time and authority to perform his duties in that role. MTC has taken an additional step by designating an assistant PREA Coordinator. MTC's Policy and Audit Director, is designated as the Assistant PREA Coordinator. These individuals are higher level staff who have the authority and ability to implement the PREA Standards with the complete support of the Senior Vice President. Interviews with both the PREA Coordinator and the Assistant PREA Coordinator indicated they have an exceptional

knowledge of PREA and both have invested considerable time and energy into working with their facilities to maintain compliance with all the PREA Standards.

- (c) The Warden of Giles W. Dalby Correctional Facility provided a memo designating the ACA Compliance Manager as the prison PREA Compliance Manager. An interview indicated that she has a great deal of correctional experience and sufficient time and authority to coordinate the facility's effort to comply with the PREA Standards.

This standard is rated "exceeds" because of the company and the facility's commitment to zero tolerance as evidenced in MTC Policy, Giles W. Dalby Correctional Facility, by appointing two higher level company officials who have an exceptional knowledge of PREA to serve as PREA Coordinator and Assistant PREA Coordinator, through the appointment of an alternate facility PREA Compliance Manager and through multiple interviews with staff, inmates, contractors and volunteers indicating staff, volunteers and contractors are trained annually in the Zero Tolerance Policy and that inmates have received this information multiple times through multiple means.

Corrective Action:

None

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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

This standard directs the agency who has facilities for the housing of inmates at other locations.

This standard is rated non-applicable.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- Statement Of Work
- Memo Re: New Contract for PREA Cycle Year (8/26/2016)
- Memo Re: Contracting with other entities for the confinement of Inmates (2/13/2014)
- Response To Contract Facility Monitoring Report (6/19/2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Contract Administrator (Facility Administrator)

Findings (By Provisions):

- (a) MTC is the contracting agency and has delegated authority with direct responsibility for the operation of facilities that confine inmates and detainees; it does not have authority to contract with other entities for the confinement of inmates. Therefore, Giles W. Dalby Correctional Facility does not have authority to contract with other entities for the confinement of inmates. Interviews with the Assistant Agency PREA Coordinator and the Facility Warden indicated that the facility does not and has not contracted any other entity for the confinement of inmates.
- (b) An interview with the BOP Facility Contract Monitor and a review of the "Response to Contract Facility Monitoring Report" revealed the facility's compliance with PREA.

Per a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, there were zero contracts for the confinement of inmates that the facility entered or renewed with private entities or other government agencies since the last PREA audit.

Corrective Action:

None

Standard 115.13 Supervision and monitoring

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

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

This standard directs the facility in how to monitor and supervise inmates as it relates to PREA.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1-3
- FP-3-A2 Patrols & Inspections
- Post Order 1.01 Central Control – Pg. 1
- Post Order 3.01 – Pg.1
- Post Order 6.01 – Pg. 1
- Facility Staffing Plan Review (2014, 2015 and 2016)
- Memo Re: Staffing Plan Development Process (8/26/2016)
- Daily Work Roster (1st Shift; 2nd Shift; 3rd Shift)
- PREA Meeting (1/8/2017)
- Vacancy Rate Report (Past 12 Months) Re: Staff Vacancies
- Security Roster & Activity Log Re: Supervisor Rounds & Staffing Deviations (All Shifts)
- Meeting Minutes Re: Video and Monitoring Technology Updates
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails

- Interviews:

- o Sr. Director, Management & Operations (Agency PREA Coordinator)
- o Director, Policy & Audits (Assistant Agency PREA Coordinator)
- o Facility Warden
- o Facility PREA Compliance Manager
- o Higher Level Facility Staff (Deputy Warden)

Findings (By Provisions):

(a) Giles W. Dalby Correctional Facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and uses video monitoring to protect inmates against abuse. An interview with the Warden indicated that the facility takes into consideration the 11 requirements in standard 115.13 (a) – 1:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any findings of inadequacies from Federal Investigative agencies;
- Any findings of inadequacy from internal and external oversight bodies;
- All components of the inmate population;
- The composition of the inmate population
- The number and placement of supervisory staff; institution programs occurring on a particular shift;
- Any applicable State or Local Laws, Regulations or Standards;
- The prevalence of substantiated or unsubstantiated incidents of sexual abuse; and
- Any other relevant factors.

(b) An interview with the Facility Warden revealed each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. Cameras are strategically located to supplement staffing and to enhance supervision of inmates. There are approximately 209 plus cameras deployed. The auditor is not going to provide further information related to these because of security concerns however, observations made during the tour confirmed this facility has a considerable number of cameras strategically located throughout the facility supplementing supervision inside the facility fence and outside.

(c) MTC Policy 903 E.02 and the interview with the Facility Warden revealed that at least annually, in collaboration with the PREA coordinator, the facility reviews the staffing plan to see whether adjustments are needed in:

- The staffing plan;
- The deployment of monitoring technology or
- The allocation of agency/facility resources to commit to the staffing plan to ensure compliance.

The Warden and PREA Compliance Manager, in interviews, confirmed the process for conducting annual reviews. There were no allegations of sexual violence and no deviations from the staffing plan, and there is no need for adjustments to the staffing plan.

Per a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, the average daily number of inmates on which the staffing plan was predicated was 1900.

(d) Interviews with the Facility Management Team and documentation reviewed revealed that the intermediate level and/or higher level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. MTC Policy Serial No: 903E.02, section 3.c, page 6, requires unannounced rounds to be performed on all shifts and all areas of the facility occupied by inmates.

When announced rounds are being conducted, Giles W. Dalby Correctional Facility policy directs staff not to alert other staff. Policy 1.01 Central Control page 1, states “staff is prohibited from alerting other staff members that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. There is a concern with the following wording within the policy “rounds to be performed on all shifts and all areas of the facility occupied by inmates”. Interviews with some intermediate level staff indicated that they only conduct unannounced rounds only where the inmates are located and not areas such as close kitchen, laundry, gym, admin areas.

The facility provided documentation to confirm unannounced rounds are being conducted. Unannounced rounds are documented in the log books in the inmate’s living units. The documentation reviewed from the log books only states “conduct grounds”.

Corrective Action:

MTC Policy Serial No: 903E.02, section 3.c, page 6 requires unannounced rounds to be performed on all shifts and all areas of the facility occupied by inmates. There is a concern with the following wording within the policy, “rounds to be performed on all shifts and all areas of the facility occupied by inmates”. Interviews with some intermediate level staff indicated that they only conduct unannounced rounds where the inmates are located and not areas such as kitchen, laundry, gym, admin areas. It is recommended that the facility release a directive to the Management Team to conduct unannounced rounds in all locations of the facility until policy change is approved by the Agency. The intermediate level staff needs to include all areas of the facility when conducting unannounced rounds to deter sexual activity.

The second concern is that, the facility provided documentation to confirm unannounced rounds are being conducted. Unannounced rounds are documented in the housing log books. The documentation reviewed from the log books only states “conduct grounds”. It is recommended that detailed information is documented in the log book, for example: Asking inmates whether they feel safe, checking doors to ensure they are lock, ensuring all inmates are in there assigned locations, staff is in their assign location, etc.

Verification:

The facility released a directive instructing the management team when conducting unannounced rounds to include all points of the facility whether inmates are scheduled there or not and detail more information in the PREA unannounced documentation.

Standard 115.14 Youthful inmates

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

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

This standard requires youthful inmates to be out of sight, sound and physical contact with adult inmates.

This standard is rated non-applicable.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Facility Contract Re: Contractual Requirements – Pg. 1, 10, 11
- ODS – Census Site Report (Inmates Records)
- Memo Re: Detention of Youthful Inmates and Documentation Used (8/26/2016)
- SHU – Detention Report Re: Youthful Inmate (Review Blank Form)
- SHU – BP-292 Re: Youthful Inmates (Review Blank Form)/ Special Housing Unit Record
- Facility Tour
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility PREA Compliance Coordinator

Findings (By Provisions):

- (a) Interviews with the Agency and Facility Management team and, a review of facility demographics/documentation reveal that Giles W. Dalby Correctional Facility does not admit youthful inmates. A Memo dated August 26, 2016 reveals that The Giles W. Dalby Correctional Facility is a private contract facility tasked with the obligation to house adult male criminal alien inmates. Prior to arriving at the facility, inmates are screened by the Bureau of Prisons “Designation & Sentence Computation Center” to ensure contractual compliance. Upon arrival, the inmates are screened by unit Classification personnel to ensure the inmate meets contract requirements to include adult status. If an inmate deemed as “Youthful” is received; the facility has a process where they place the youthful inmate in Administrative Segregation and services are provided while awaiting transfer to a more suitable facility.

Interviews with the Facility PREA Compliance Manager and randomly selected staff indicated youthful inmates are not housed in this facility. Interviewed randomly selected staff stated youthful inmates are not housed at this facility and during the audit period no youthful inmates were observed.

The PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails indicated in the past 12 months, the number of housing units to which youthful offenders are assigned is zero.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months there were no youthful offenders housed at the facility.

Corrective Action:

None

Standard 115.15 Limits to cross-gender viewing and searches

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

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

This standard directs the facility about how it treats transgendered and intersex residents in regards to cross-gender strip searches or cross-gender body cavity searches.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prison – Pg. 1, 7
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 13
- FP-3-A6 Control of Contraband Re: Cross Gender Viewing & Transgender Inmates Pg. 1,2,3
- Lesson Plan- Contraband, Clothed and Unclothed Searches, & Cell Searches
- Memo Re: Cross Gender Strip/visual Body Cavity Search Documentation (Cross Gender Search Log)
- Pre-Service/In-Service Orientation Training Schedule Re: Inmate Searches and Rosters
- Medical Use – Cross Gender Strip and/or Visual Body Cavity Search Log (Past 12 Months) Blank Form
- Security Use – Cross Gender Strip and /or Visual Body Cavity Searches not conducted by Medical (Blank Form)
- Provider Progress Note Re: Visual Body Cavity Search (s) (Blank Form)
- Signage Re: Gender Notification
- Activity Log Re: Gender Notification
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Officers
 - o Non-Medical Staff Cross Gender Searches (Officer)
 - o Random Inmates

Findings (By Provisions):

- (a) MTC policy directs staff not to conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. Documentation review indicated Giles W. Dalby Correctional Facility reports no exigent circumstances for this audit period. The facility maintains a log book to document when exigent circumstances occur. Memo Re: Female Staff and Cross-Gender Strip/Visual Body Cavity Searches dated August 26, 2016, states that the facility houses adult male inmates. The facility's search policy prohibits female staff from conducting strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by authorized medical personnel. Facility documentation also indicated that no female staff member has been authorized to conduct the above searches within the PREA audit period. The facility provided documentation that the Giles W. Dalby Correctional Facility is for the management and operations of adult male offenders and female offenders are not housed in this facility. Interviewed staff related female staff does not conduct cross-gender pat searches of male inmates. Interviews with inmates confirmed that none of them had been strip searched by a female officer.
- (b) Giles W. Dalby Correctional Facility rated capacity is 1921, which exceed the 50 inmate rule. This provision does not apply.
- (c) Staff interviews and facility documentation indicated that all cross-gender strip searches and cross-gender visual body cavity searches will be documented. The facility only houses male inmates. Female Officers do

not conduct cross-gender strip searches and cross-gender visual body cavity searches.

- (d) MTC Policy 903E.02, Limits to Cross-Gender Viewing, section C, requires Giles W. Dalby Correctional Facility to implement policies and procedures that enable inmates to shower and perform bodily functions and change clothing without non-medical staff of the opposite gender viewing the breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell or bed checks. Interviewed inmates stated they are never naked in full view of staff and are provided privacy while changing clothes, showering and using the restroom. Observations of restrooms and shower during the tour confirmed inmates have privacy when using the restroom, showering and changing clothing. PREA friendly shower curtains are at the door way of the bathrooms and the shower areas to provide a little privacy even in an open bay dormitory style pod or dorm. Inmates reported they are never naked in full view of cross-gender staff.
- (e) According to staff interviews and documentation review, the facility has not housed any transgender or intersex inmates. However, MTC policy directs staff not to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, the facility determine during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.
- (f) If the facility were to receive a Transgender or Intersex inmate, the staff is trained on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The facility provided samples of documentation to confirm staff has received and receive search training consistent with the MTC policy. The PREA Compliance Manager confirmed there have been no cross-gender strips or visual body cavity searches conducted within the audited cycle.

Per a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, in the past 12 months there were zero cross-gender strip and visual body cavity searches of inmates.

Overall Interview Results:

Eighteen (18) security staff, representing staff from all three shifts, were interviewed. One hundred percent (100%) of staff interviewed indicated that cross-gender pat searches were not permissible. All interviewed staff stated that they were trained on conducting cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. All staff interviewed reported that they have been trained on the PREA policy prohibiting staff from searching or physically examining a transgender or intersex resident for determining the inmate's genital status. The training occurs during pre-service, in service, and shift briefings.

Eighteen (18) of the twenty (20) inmates reported that staff announce the presence of female staff when they are entering the housing areas. Three (3) of the twenty (20) inmates stated that others can see them when showering because there are cracks in the curtain or the curtain is see through. Most of the inmates reported that no one can see them when they are showering, using the toilet, or changing clothes. 100% of the staff reported that inmates can dress, shower, and toilet without being viewed by staff of the opposite gender and that female presence on housing units is always announced.

No female inmates are housed at the facility.

Corrective Action:

None

Standard 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)

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

This standard directs the facility to ensure that inmates who are limited English proficient and inmates with disabilities be afforded the same equal opportunities to participate in or benefit from the facility's effort to prevent, detect, and respond to sexual abuse or harassment.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1,7,8
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program- Pg. 1,6
- Inmate A&O Booklet (English & Spanish) Re: PREA and Interpreter Services
- PREA Posters (English & Spanish)
- Memo Re: Braille PREA Data and PREA Video (3/1/2017)
- Memo Re: Facility Interpreter Services (8/26/2016)
- Photo Re: Braille _ PREA Booklet (English & Spanish)
- Legal Language Services (2/7/2014)
- Telephonic Interpreting Services – Telephone Use, Rates, & Confidentiality
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Officers
 - o Random Inmates
 - o Disabled Inmates
 - o English Proficient Inmates

Findings (By Provisions):

- (a) The facility has taken appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. To ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the facility ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

Inmates are screened by the Designation & Sentence Computation Center (DSCC) prior to facility placement. The

DSCC screens each inmate based upon custody, classification, psychological, physical and medical needs. Inmates with special needs i.e., hearing or sight impaired are assisted on an as needed basis.

The Giles W. Dalby Correctional Facility provided PREA documentation in Braille formats for those inmates that meet the requirement. Video is used during orientation as well as in the dorm setting. PREA related information is delivered to the inmate population through a closed-circuit television. PREA related video content is narrated in both English and Spanish for the hearing and or visually impaired.

- (b) The facility has taken reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Staff interviews and documentation indicated that onsite interpreters are provided for Spanish speaking inmates. Assistance may be requested through security staff. Outside interpreting services are available to the inmate population as dictated by policy and customer requirements. Interviews with the PREA Compliance Manager and other staff indicated that over fifty (50) percent of the staff speaks Spanish.
- (c) The facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties or the investigation of the inmate's allegations. Interviewed staff consistently stated they would not allow, except in emergency situations, an inmate to translate or interpret for another inmate in making an allegation of sexual abuse. They indicated there is staff always working the shift who speak Spanish, the predominant language of the inmates.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months there were zero instances where inmate interpreters, readers, or other types of inmate assistants have been used.

Overall Interview Results:

One hundred (100%) of the interviewed security staff, reported that resident interpreters are prohibited. The Dalby Correctional Facility has a predominantly Spanish speaking resident population; with Spanish speaking, direct and indirect care staffs who serves as interpreters.

Eight (8) of the twenty (20) inmates interviewed were limited English proficient. One-hundred (100%) of those eight (8) reported that the facility provides information about sexual abuse and harassment in Spanish and English. The Giles Dalby Correctional Facility has a predominately Spanish speaking inmate population. In addition, the facility has many correctional and administrative staff who are Spanish speaking, providing inmates with understanding of their rights at the facility.

One disabled inmate was interviewed and reported feeling safe at the facility, and was provided information regarding sexual abuse and harassment. The disability did not hinder the inmate from receiving information consistent with the random sample of inmates interviewed.

Corrective Action:

None

Standard 115.17 Hiring and promotion decisions

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

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

This standard directs the facility in hiring and promotional practices in regards to PREA.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 8
- MTC Recruitment and Employment/Personnel Procedures – Pg. 1-5
- Facility Contract Re: Employee Promotions and Hiring Requirements – Pg. 1,95,96,98,99
- MTC PREA Interview (Promotions) Process 1/1/2014
- MTC PREA Interview (New Hires – Process 1/1/2014
- Sub-Contractor Background Checks Re: Employees with “Inmate Contact”
- Background Checks Re: New Employees
- Employees Background Screening Reports
- Five Year Employee Background Checks for Current Employees & Contractors
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Human Resource Staff)

Findings (By Provisions):

- (a) The facility does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates as listed in this standard to include the following provisions:
1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
 2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
 3. Has been civilly or administratively adjudicated to have engaged in the activity described in number 2.

MTC Standard Operating Procedure requires Gile W. Dalby Correctional Facility to ask the three questions. The facility provides the applicant with a PREA Interview form and each applicant responds to each question above and signs and dates for documentation proposes.

- (b) The facility considers incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of contractors, that may have contact with inmates. The facility does not perform criminal

background checks on promotions at the time of promotions, due to five (5) year reinvestigations as per BOP contract. In addition the facility employee must report any arrest to the facility within 24 hours. Any staff promoted is asked the PREA questions again during the promotion interview. NCIC background checks are run on promotions to any of the essential staff vacancies.

- (c) MTC policy directs facility before hiring new employees that have contact with inmates are to complete a criminal background records checks and make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse and any resignation during a pending investigation of an allegation of sexual abuse.

The facility human resources manager is responsible for ensuring a background check is completed on all individuals who are identified and selected for employment regardless of status e.g. full time, part-time, on-call, temporary as well as candidates for intern positions. Each applicant selected for employment is required to sign an application for employment and background verification disclosure form giving authorization to conduct the background check. All offers are contingent upon successful completion of background checks. Background screening is conducted by Information Discovery Services, LLC.

- (d) The facility completes a criminal background records check before enlisting the services of contractors who may have contact with inmates. The Giles Dalby Correctional Facility conducts criminal background checks on all applicants. The facility conducts pre-employment integrity interviews, asking the PREA questions as a separate set of interview questions. The Bureau of Prisons pre-employment interview questions also ask specific questions about criminal background, including a section on abuse of any person detained in law enforcement's custody, including sexual contact. Then the facility sends a completed SF85P packet to Information Discovery Services to run background checks before hiring the applicant. If an applicant passes the background checks an approval request is sent to the Bureau of Prison on site monitor, who then conducts another criminal background check through National Criminal Information Center (NCIC).
- (e) The facility conducts criminal background records checks every five years of current employees and contractors who have contact with inmates. The facility human resources manager oversees an updated background check every five years on current employees. An interview with the HR Manager indicated that all vendors/contractors and volunteers NCIC checks must be approved by the Bureau of Prison each year.
- (f) The facility asks all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self- evaluations conducted as part of reviews of current employees. The facility also imposes upon employees a continuing affirmative duty to disclose any misconduct related to PREA.
- (g) MTC policy prohibits staff from material omissions and the provision of materially false information as detailed in MTC policy 203.01.B.8.b.18 Rules of Conduct.
- (h) Interviews with the HR manager indicated that the facility will provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer for that the employee has applied to work. An interview with the HR manager indicated during this audit cycle there were no such requests.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months there were 52 persons hired who may have contact with inmate who have had criminal background record checks completed.

Corrective Action:

None

Standard 115.18 Upgrades to facilities and technologies

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

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

This standard directs the agency when considering upgrades to its facility or technologies.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 8
- Spreadsheet Re: Video Camera Locations (s) Modification (s), and Additions (s)
- Diagrams (s) Re: Video Camera Locations
- PREA Meetings Minutes Re: Monthly Status Review
- Memo Re: Facility Upgrades
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden

Findings (By Provisions):

Interviews and facility documentation indicated that Giles W. Dalby Correctional Facility has not had any upgrades or substantial expansion as well as adding major surveillance cameras to the video system.

- (a) According to interviews with the Senior Vice President of Corrections, Senior Director of Management and Operations and Director of Policy & Audits and MTC policy when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the plan will consider the effect of the design, acquisition, expansion, or modification upon the facility's ability to protect inmates from sexual abuse.
- (b) According to interviews with the Senior Vice President of Corrections, Senior Director of Management and Operations and Director of Policy & Audits and MTC policy when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the plan will consider how the technology may enhance the facility's ability to protect inmates from sexual abuse.

Corrective Action:

None

Standard 115.21 Evidence protocol and forensic medical examinations

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

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

This standard directs the facility's evidence protocol and forensic medical examinations as it relates to PREA.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,10, 11
- Facility Contract Re: Investigative and Arrest Authority
- Garza County Collection & Preservation of Evidence Protocol
- A National Protocol for Sexual Assault Medical Forensic Examinations
- Memo Re: Investigative and Treatment Authority
- MOU Re: Rape Crisis Center
- MOU Re: UMC SAFEs, SANEs, and Cost of Exam
- MOU re: Responsible Agency for Investigating Sexual Assaults
- Victim Advocate Certification – Qualified Staff Member (s)
- Sexual Assault Investigation Packet (Blank)
- PREA Notification Log Re: Victim Notification (Blank)
- PREA Victim Notification Memorandum (Blank)
- Family Violence Report (Blank)
- Sexual Assault Report (Blank)
- Garza County Sheriff's Department Family/Domestic Violence Packet and Checklist
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility PREA Compliance Manager
 - o Random Officers
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility is responsible for investigating allegations of sexual abuse. Administrative and/or criminal investigations are completed for all allegations of sexual abuse or sexual harassment. The facility utilizes the Garza County Sheriff Department to conduct investigations regarding all felony related crimes to include alleged sexual violence that occurred at the facility. Both the facility and the Garza County Sheriff Department follow a uniform evidence protocol that maximizes the potential for

obtaining unable physical evidence for administrative proceedings and criminal prosecutions.

The protocol is appropriate, and is adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. The facility does not house youth/Adolescents.

If there was a sexual abuse allegation, interviewed staff indicated that the facility will offer all victims of sexual abuse access to forensic medical examinations at an outside hospital, without financial cost. Examinations are performed by Sexual Assault Forensic Examiners (SAFEs). If SAFEs cannot be made available, the examination is performed by other qualified medical practitioners at the hospital. The facility documents its efforts to provide SAFEs or SANEs through the MOU with the local Rape Crisis Center.

University Medical Center (UMC) is utilized for all emergency care or treatment to include "Sexual Assault Forensic Examinations". UMC examiners are qualified SAFE and SANE practitioners that comply with the National Protocol for Sexual Assault Medical Forensic Examinations. An Appropriately trained health care provider at a community hospital will complete the forensic examination (sexual assault kit) of the victim free of charge. This examination is not conducted by the facility medical staff. The results of the physical examination and all collected physical evidence are provided to authorized staff only. Part of the investigative process includes an examination of and collection of physical evidence from the suspected assailants.

- (b) The facility makes available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the facility make available to provide services a qualified staff member from a community-based organization, or a qualified facility staff member. The facility provided documents that showed efforts to secure services from rape crisis centers.

The victim advocate, is a qualified facility staff member, or qualified community-based organization staff that accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. The facility utilizes the Lubbock Rape Crisis Center (LRCC) for staff training and direct contact support for inmate victims of sexual violence. The LRCC provides Sexual Assault Victim Advocate support training to facility personnel on an as needed basis. The facility has two staff member trained as Victim Advocates.

- (c) Interview with the Warden and Facility Investigator indicated when outside agencies are responsible for investigating allegations of sexual abuse, the facility requests that the investigating agency follows the requirements of PREA. This includes standard provision (g) 1 and 2. Policy requires the Warden to request that outside investigative authorities conduct the investigation in accordance with PREA investigation standards.
- (d) The MTC policy defines a qualified facility staff member or a qualified community- based staff member as an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. The facility has two staff members trained as Victim Advocates.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months zero forensic medical exams were conducted.

Overall Interview Results:

One hundred percent (100%) of the interviewed security staff were knowledgeable of the staff responsible for internal and external investigations. All the staff were able to describe the process and steps required to protect physical evidence; which included securing the area, protecting the physical evidence, not allowing the victim to shower or brush teeth, and immediately seeking medical attention.

Corrective Action:

None

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

This standard directs the facility’s efforts at referring allegations for investigations to an appropriate investigatory agency for all sexual abuse or harassment allegations.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 9
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,10,11
- MOU Re: Responsible Agency for Investigating Sexual Assaults
- Garza County – Sexual Assault Protocol
- Sexual Assault Investigation Packet (Blank)
- Memo Re: Referrals of Allegations Sexual Abuse/Harassment
- MTC Website Re: PREA Contact Representative Data
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Officers
 - o Investigator

Findings (By Provisions):

- (a) According to interviews with the Senior Vice President of Corrections, Agency PREA Coordinator, Assistant PREA Coordinator, and the Facility Investigator, the facility ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment reported on inmate-on-inmate or staff-on-inmate misconduct.

The initial investigation begins immediately by correctional staff, normally SIS staff. The facility uses a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. In accordance with policy, the OIG and/or the Garza County Sheriff’s Department are notified immediately and assume control of the investigation when appropriate. The Facility has a MOU with the Garza County Sheriff Department that provides a Crime

Scene/Accident Specialist. The specialist is available on a 24 hour basis.

Investigations are documented in a written report that contains a through description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence.

An additional interview with Facility Investigator confirmed the process for receiving an allegation and for conducting the investigation if an alleged sexual abuse was reported. Interviewed staff stated, they have been trained to report everything for investigations, including reporting, knowledge, allegations and suspicion of sexual abuse or sexual harassment. Staff affirmed they are trained to accept reports from all sources, including third parties and anonymous reports.

- (b) The Giles W. Dalby Correctional Facility have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations. Per policy substantiated allegations of conduct that appears to be criminal are referred for prosecution. SIS staff imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.
- (c) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. MTC publishes the policy on its website.
- (d) Department of Justice components responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails have in place a policy governing investigations. The facility has a MOU Re: Responsible Agency for Investigating Sexual Assaults.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, during the past 12 months there were zero allegations of sexual abuse and sexual harassment that were received.

Overall Interview Results:

One hundred percent (100%) of the security staff interviewed reported that internal investigations are handled by SIS and external investigations are handled by Garza County Sheriff' Department.

Corrective Action:

None

Standard 115.31 Employee training

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

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

This standard directs the facility in its efforts to train all facility staff in the PREA requirements.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 9
- 901D.02 Training Requirements – Pg. 1,3
- FP-1-D1 Training & Staff Development – Pg. 1-4
- PREA Training Curriculum
- Pre-Service/In Service Orientation Training Schedule & Roster Re: PREA Training
- Prison Rape Elimination Act – Training Acknowledgement
- In-service/Pre-Service Summary Review Test Re: PREA Knowledge
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Officers
 - o Staff

Findings (By Provisions):

- (a) The Facility has trained staff that has contact with inmates on the eleven (11) requirements stated in this standard. According to staff interviews, sexual abuse and sexual harassment training is provided in pre-service and in-service training and include all requirements.
- (b) Training is tailored to the gender of the inmates at the employee's facility. Review of documentation revealed that staff receive additional training if the staff is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa. The staff will receive this training through additional pre-service training. This facility housed only male inmates.
- (c) All current employees have received training and the facility has provided each employee with refresher training every two years to ensure that all employees know the facility's current sexual abuse and sexual harassment policies and procedures. During the on-site visit the auditor observed during a shift briefing that officers were given refresher training. Staff interviews early indicated that refresher training is a common practice during shift briefings.
- (d) The Facility documents, through employee signature and electronic verification staff understanding of the training they have received. The Giles W. Dalby Correctional Facility documents staff training using the Training Acknowledgement form and a training roster, which requires the staff and instructor signature, date and job title.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months there were 186 employees assigned to the facility who were trained on the PREA requirements.

Overall Interview Results:

The auditor interviewed eighteen (18) security staff that could articulate the topics covered in the PREA training. One hundred percent (100%) of the security staff reported being knowledgeable of the topics they had been trained in. The staff could describe the training on zero tolerance, resident and staff rights, dynamics of sexual abuse and sexual harassment, working with vulnerable populations (LGBTI, prior history of sexual victimization), prevention and response protocol as well supportive services available to inmates. The staff reported that they received training in pre-service, in-service, and during shift briefings.

The auditor was able to observe a shift briefing. The shift briefing, exceeded expectations in that they covered PREA standards, by conducting a review of various components of PREA with staff during all shift briefings. The staff were provided random questions and was able to clearly articulate a response based on PREA site policies.

Corrective Action:

None

Standard 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)

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

This standard directs facility’s efforts to train volunteers and contractors in the PREA requirement.

Supporting Documents, Interviews and Observations

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP-1-D1 Training & Staff Development – Pg. 1, 2, 4
- PREA Training Curriculum
- Volunteer Training Record Re: PREA
- Pre-Service/In-Service Orientation Training Roster – Volunteer
- Prison Rape Elimination Act – Training Acknowledgement – Volunteer
- Contract Employee Training Record Re: PREA
- Pre-Service/In-Service Orientation Training Roster – Contractor
- Prison Rape Elimination Act – Training Acknowledge - Contractor
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Volunteer
 - o Contractor

Findings (By Provisions):

(a) The Giles W. Dalby Correctional Facility trains all volunteers and contractors who have contact with inmates on their responsibilities under the facility’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. According to the PREA Audit: Pre-Audit Questionnaire the facility trained 98 volunteers and contractors within the past 12 months.

(b) Interviews and documentation indicated that the level and type of training provided to volunteers and contractors

are based on the services they provide and the contact they have with inmates. All volunteers and contractors are notified of the facility's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report alleged incidents.

(c) The facility maintains documentation confirming that volunteers and contractors understand the training they received. The Giles W. Dalby Correctional Facility documents volunteer and contractor training using the Training Acknowledgement form and rosters, which requires the volunteers, contractors and instructor signature and date.

Overall Interview Results:

An interview with the Chaplain/Volunteer Coordinator who has contact with the inmates indicated that the volunteers received the same level of training as staff. The Chaplain indicated that volunteers are provided additional training for faith based services regarding inappropriate and appropriate behavior that could impact PREA for religious practices. The volunteers are given an 8-hour training which encompasses PREA standards. The Training covers the agency's zero tolerance standards, what to do if a resident reports sexual harassment to a volunteer, signs of abuse and abuse prevention, who to notify if a PREA allegation occurs, and how to make a report. All volunteers sign a PREA document acknowledging that they understand agency's policies related to PREA.

Corrective Action:

None

Standard 115.33 Inmate education

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

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

This standard directs the facility to provide during the intake process information regarding the facility's zero tolerance policy about sexual abuse and harassment and how to report sexual abuse and harassment.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1,9,10
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,5,6
- Inmate A & O Booklet (English & Spanish) Re: Inmate PREA Education
- Orientation Sign-in Sheet Re: PREA
- Memo Re: Braille PREA Data and PREA Video
- PREA Posters
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

- Intake Staff
- Random Inmates

Findings (By Provisions):

(a) Staff interviews and documentation review indicated that during the intake process, inmates receive information explaining the facility's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The facility included the following in the inmate education:

- Definition of Sexual Violence
- Specifics about the Prison Rape Elimination Act
- Rights as a Victim
- Prevention/Intervention
- Self-Protection
- Reporting Sexual Violence
- Treatment and Counseling
- Information about the effects of sexual violence on Victims
- Who to contact if an inmate feel vulnerable
- How to report incidents that happen to others
- Ways to avoid sexual violence
- What happens if an inmate makes a false report
- Confidentiality

During intake, inmates are given the inmate handbook. During orientation, additional PREA related information is provided and the video is shown. The staff conducting intake/orientation gives inmates the opportunity to ask questions to clarify anything they do not understand. Inmates acknowledgement statements were provided of receiving PREA information.

- (b) The facility provides comprehensive education to inmates in person and through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. This information is provided to the inmates within 30 days.
- (c) All inmates at the Giles W. Dalby Correctional Facility received and have been educated on PREA. Inmates that transfer to the facility also receive the required PREA Education.
- (d) Inmate interviews confirmed that the facility provides inmate education in formats accessible to all inmates, including limited English proficient, deaf, visually impaired, disabled, as well as to inmates who have limited reading skills. Staff and inmate interviews reveal that the facility provides the PREA Education in English and Spanish, to include inmate handbooks and posters. The facility also provided inmate PREA documentation in Braille format for those inmates that meet the requirement. Video is used during orientation as well as in the dorm setting. PREA related information is delivered to the inmate population through a closed circuit television. PREA related video content is narrated in both English and Spanish for the hearing and or visually impaired.
- (e) The facility maintains documentation of inmate participation in the education sessions by using the Inmate Orientation check list. The check list requires the inmate to sign and date and is witnessed by staff signature.
- (f) In addition to providing PREA education, the facility ensures that key information is continuously and readily available and visible to inmates through posters, inmate handbooks, and other written formats.

Overall Interview Results:

Twenty (20) inmates were interviewed. Seventeen (17) of the twenty (20) inmates reported that they recall receiving information upon intake and orientation regarding sexual abuse and harassment. The information was provided to them in a handbook within 2-3 days of being at the facility. Three (3) of the inmates reported that they could not recall or remember. Over 75% of the inmates reported that they were provided information on posters regarding who to call if they were being sexually abused or harassed; however, most inmates struggled to articulate if they understood what would happen if they contacted the sexual assault center. A majority of the inmates reported feeling comfortable with contacting the Sexual Assault Center hotline; however, three (3) inmates reported not feeling comfortable as the hotline number records their conversation. The PREA hotline posters are located throughout the facility.

The intake officer, in an interview, stated that all inmates are provided an admission and orientation handbook immediately upon arrival at the site. All inmates are provided information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. There are PREA related posters in the intake area along with the resident handbook which covers the sites zero tolerance policies, how to report, and to be free from retaliation for reporting incidents. The handbook is also provided in Spanish.

Corrective Action:

None

Standard 115.34 Specialized training: Investigations

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

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

This standard directs the specialized training requirements for investigators.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg.1,10
- Garza County – Sexual Assault Protocol
- Garza County – Investigation Protocol “Certification”
- Garza County – Investigation Training Documentation
- Facility Investigators - Investigation Protocol “Certification”
- OIG – PREA Course Outline & Email
- FBI/OIG Correspondence Re: Training Requirements
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Investigator

Findings (By Provisions):

- (a) In addition to the general PREA training provided to all employees, the Giles W. Dalby ensures that its Facility investigators have received training in conducting investigations in confinement settings. Interviews and documentation reveal that Garza County Sheriff Department has completed the required training.
- (b) The Specialized training was conducted by ACA and Online with Relias Learning, and the Garza County Sheriff Department training is listed on the Texas Commission on Law Enforcement Personal Education sheet. Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action and prosecution referral.
- (c) The facility maintains documentation of investigators having completed the required specialized training in conducting sexual abuse investigations. The following documentation was reviewed:
 - Texas Commission On Law Enforcement /Courses Completed
 - ACA Certificate of Completion / PREA: Investigation Protocols
 - Relias Learning / Online PREA: Investigation Protocols
- (d) Department of Justice component that investigates sexual abuse in confinement settings shall provide training to agents and investigators who conduct such investigations. The facility provided an email title “Mandatory PREA Training Requirements” dated January 30, 2014, attachment: OIG PREA Training. Email stated “He (ASAC Scott Barden) provided this e-email with attachment to the PREA Commission partly so every BOP institution would not be required to ask the OIG for proof of our training. So my understanding is that you PREA audit should not ask you for proof of our training since we have already advised the commission of the training.”

Corrective Action:

None

Standard 115.35 Specialized training: Medical and mental health care

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

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

This standard directs the facility to have each medical and mental health staff member go through additional specialized training beyond that given to all employees.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)

- 903E.02 Ensuring Safe Prisons – Pg. 1,10,11
- MTC B-07 Continuing Health Education for Health Service Staff – Pg.1,2
- Facility Medical Personnel Listing
- PREA Training Documentation Re: Medical & Mental Health Practitioner
- Sexual Assault Medical Packet
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Medical Staff
 - o Mental Health Staff

Findings (By Provisions):

- (a) Interview with the Giles W. Dalby Correctional Facility medical and mental health staff indicated that all full- and part-time medical and mental health care practitioners who work regularly in the facilities have been trained around:
 - How to detect and assess signs of sexual abuse and sexual harassment,
 - How to preserve physical evidence of sexual abuse,
 - How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
 - How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
- (b) The medical staff at Giles W. Dalby does not conduct forensic examinations. The University Medical Center (UMC) is conducts all emergency care or treatment to include “Sexual Assault Forensic Examinations”. UMC examiners are qualified SAFE and SANE practitioners that comply with the National Protocol for Sexual Assault Medical Forensic Examinations.
- (c) The facility maintains documentation that medical and mental health practitioners have received the training referenced in this standard. Training rosters and staff meetings sign in sheets was submitted to the auditor.

Corrective Action:

None

Standard 115.41 Screening for risk of victimization and abusiveness

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

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

This standard directs the facility’s effort at gathering information within 72 hours of intake and periodically thereafter during confinement.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 11
- FP-3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,3,4
- Intake Screening: Risk of Sexual Victimization & Abusiveness
- BP A1030 Screening for Risk of Victimization & Abusiveness/Reassessment
- Psychology Services Questionnaire Re: Inmate Consent
- 30 Day Medical Assessment Re: Additional Data
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility PREA Compliance Manager
 - o Staff Screening for Risk of Victimization and Abusiveness
 - o Random Inmates

Findings (By Provisions):

- (a) The facility assesses all inmates during intake screening to include inmates that transfer from other prisons for risk of being sexually abused.
- (b) Interviews and documentation revealed that intake screenings are taking place within 72 hours of arrival at the Giles W. Dalby Correctional Facility. In addition, during intake screening, procedures requires staff review available documentation (judgment and sentence, commitment orders, criminal records, investigation reports, field and medical files) for any indication that an inmate has a history of sexually aggressive behavior. Housing assignments are made accordingly.
- (c) The facility uses the Federal Bureau of Prisons Intake Screening form and the Screening for Risk of Victimization and Abusiveness as the objective screening instruments.
- (d) Staff interviews and documentation review reveal that the Screening for Risk of Victimization and Abusiveness include the following:
 - Whether the inmate has a mental, physical, or developmental disability;
 - The age of the inmate;
 - The physical build of the inmate;
 - Whether the inmate has previously been incarcerated;
 - Whether the inmates' criminal history is exclusively nonviolent;
 - Whether the inmate has prior convictions for sex offenses against an adult or child;
 - Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 - Whether the inmate has previously experienced sexual victimization;
 - The inmate's own perception of vulnerability; and
 - Whether the inmate is detained solely for civil immigration purposes.

Staff interviews with the Case Management Coordinator and the Mental Health Professional indicated that the facility uses the Bureau of Prisons Intake Screening Form and the PREA Intake Objective Screening Instrument to document this process. The PREA Intake Objective Screening Instrument has all of the required criteria. The results of the assessment are documented on the Bureau of Prisons Intake Screening Form whether the inmate is vulnerable or sexually aggressive.

- (e) Interviews and documentation reviewed indicated that the Mental Health staff reassesses the inmates' risk level for sexual victimization or sexual abusiveness whenever warranted and within 30 days of arrival at the institution if the inmate is identified at risk for victimization or for being at risk for being sexually abusive.

A copy of the initial intake Screening Form completed by the Case Manager is forwarded to the Mental Health Professional following the intake process. In addition, the Case Management Coordinator emails pertinent information from the inmate's PSI to the Mental Health Provider prior to each inmate's arrival. The inmate is then questioned about these risk-factors during the initial Mental Health Assessment. A separate Mental Health Progress Note is completed addressing the specific area of risk identified by Case Management, the Case Management Coordinator, or information collected with the Psychological Services Inmate Questionnaire. If the inmate is considered a risk at that point, the PREA Coordinator, Captain, and SIS will be notified by phone and by email. Inmates with an at-risk history are scheduled with Mental Health for a minimum of two mental health appointments. As of recent changes, the inmates are assessed during this period by a Licensed Professional Counselor and a licensed Psychologist.

- (f) Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to any questions as stated in section (d).
- (g) The agency implements appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates as described above.

Overall Interview Results:

Eight (8) of the twenty (20) inmates were housed at the facility within the last 12 months. Of the eight (8), seven (7) recalled being asked questions regarding prior history of sexual abuse, or whether they identified as being gay, lesbian, or bisexual. The seven (7) inmates reported being asked such questions during orientation. 100% of the inmates reported feeling safe and that sexual assault and such behaviors do not occur at the facility. Only two (2) inmates reported being reassessed since their arrival at the facility.

Corrective Action:

None

Standard 115.42 Use of screening information

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

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

This standard sets forth guidelines for the use of screening information that is used in making housing, programming, bed, education, and work assignments.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 11
- FP-3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,3,4,5
- Classification – At Risk History
- BP A1030 Screening for Risk of Victimization & SENTRY Housing, Program, Medical & Work Assignments
- Memo Re: Separated Showers for Transgender & Intersex Inmates
- Memo Re: Legal Decree's, Judgments, or Settlements Regarding Dedicated Facilities
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility PREA Compliance Manager
 - o Staff Screening for Risk of Victimization and Abusiveness
 - o LGBTI Populations Inmates
 - o Transgender and Intersex Inmates

Findings (By Provisions):

- (a) MTC Policy 903E-02, Ensuring Safe Prisons B.17, Use of Screening Information, (a), requires the Giles W. Dalby Correctional Facility to use information from the risk screening required to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. Individualized determinations about how to ensure the safety of each inmate will be made according to staff interviewed.
- (b) The contract with BOP does not allow the Giles W. Dalby Correctional Facility to accept transgender or intersex inmates. However, if the facility receives a transgender and in deciding whether to assign a transgender or intersex inmate to which male living unit and in making other programming assignments, the facility will consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.
- (c) Staff interviews indicated that when making placement and programming assignments for each transgender or intersex inmate the facility will reassess them at least twice each year to review any threats to safety experienced by the inmate.
- (d) Staff interviews also indicated if they were to have a transgender or intersex inmate, the inmate's own views with respect to his or her own safety will be given serious consideration.
- (e) Transgender and intersex inmates will be given the opportunity to shower separately from other inmates.
- (f) Interview with the Facility PREA Compliance Manager indicated that the facility will not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on identification status for protecting such inmates.

Overall Interview Results:

One (1) inmate interviewed identified as being gay. The inmate reported feeling safe at the facility and throughout his stay has encountered several administrative as well as line staff that he can speak to. The inmate stated that the staff have been very open to him and frequently check on him to see how he is doing and if he feels safe. The

inmate reported that there is no segregated housing for the LGBTI population, however if there was segregated housing for the LGBTI population “more inmates would come forward to disclose their sexuality”. The inmate reported that he is treated like all other inmates and that all inmates shower the same.

Corrective Action:

None

Standard 115.43 Protective custody

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

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

This standard sets forth guidelines for inmates at high risk for sexual victimization.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1,11,12
- FP3-E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,5
- FP3-D1 Special Housing Unit – Pg. 1,2,3,10
- Administrative Detention Order (Federal Bureau of Prisons)
- Special Housing Unit Record (Federal Bureau of Prisons)
- Special Housing Review (Federal Bureau of Prisons)
- Classification – At Risk History
- BP-292 Re: Length of Placement in SHU Due to Risk of Sexual Victimization (Blank)
- Detention Order Re: Staff Admit to PC Due to Risk of Sexual Victimization (Blank)
- 30 Day SRO review (Blank)
- 30 Day Psychological Review (Blank)
- Memo Re: Programs and Privileges Afforded Inmate in SHU
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Staff Supervise Inmates In Segregated Housing
 - o Inmates Placed in Segregated Housing (None)

Findings (By Provisions):

- (a) Interviews and documentation review at Giles W. Dalby Correctional Facility indicated that inmates at high risk for sexual victimization are prohibited from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative

means of separation from likely abusers. Interviews also reveal that if an assessment cannot be immediately completed, the facility will hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

- (b) Staff interviews indicated that if an inmate is placed in segregated housing they will be provided with access to programs, privileges, education, and work opportunities
- (c) If Giles W. Dalby Correctional Facility assigns inmates to involuntary segregated housing, policy requires them to be housed only until an alternative means of separation from likely abusers can be arranged, and assignment do not exceeds 30 days.
- (d) If the facility places an inmate in involuntary segregated housing, the facility will document as required by this provision.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirm by staff interview, there were zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment.

Corrective Action:

None

Standard 115.51 Inmate reporting

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

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

This standard directs the facility’s on how inmates are allowed to report sexual abuse and harassment.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 12
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,6,7,8
- Admission & Orientation Booklet Re: PREA Reporting Options (English and Spanish)
- Memo Re: Inmates Detained Solely for Immigration Purposes (N/A)
- Web Site: Screen –Shot MTC Ethics Hot Line
- Employee Signage – Ethics Hot Line
- MOU Re: Rape Crisis Center
- PREA Signage
- MTC Website Re: PREA Contact Representative Data
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails

- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Facility PREA Compliance Manager
 - o Random Officers
 - o Random Inmates

Findings (By Provisions):

- (a) Interviews with staff and documentation review indicated that the facility has established procedures allowing for multiple internal ways for inmates to report privately to Giles W. Dalby Correctional Facility and MTC officials regarding sexual abuse and sexual harassment, retaliation by other inmates or staff, to include staff neglect or violation of responsibilities that may contributed to PREA incidents. The follow are internal reporting ways:
 - Grievance System
 - Tell the Case Manager
 - Chaplain
 - Psychologist
 - SIS
 - The Warden or any other staff member they trust
 - Write directly to the Warden, Regional Director or Director
 - Reporting Ethical Violation Hotline

- (b) Interviews with staff and documentation indicated that the facility has established at least one way for inmates to report abuse or harassment to a public or private entity that is not part the agency, and that can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The following are external reporting ways:
 - File an Administrative Remedy/Request BP-20
 - Write the office of the Inspector General (OIG)
 - Lubbock Rape Crisis Center Hotline

An interview with the Facility PREA Compliance Manager and Memo from the Warden indicated that The Giles W. Dalby Correctional Facility is a private contract facility tasked with the obligation to house adult male criminal alien inmates. The facility does not detain inmates solely for civil immigration purposes. However, if they receive an inmate solely for civil immigration purposes the facility will provide the inmate with information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Overall Interview Results:

All twenty (20) interviewed inmates stated that they have multiple ways to report. Most of the inmates reported that they could communicate with trusted staff, write a written report, or call the hotline. With prompting from the interviewer 100% of the inmates understood the purpose of the hotline, however struggled to articulate what would happen if they called the hotline.

Three (3) of the inmates reported feeling that the hotline was not confidential because the calls were recorded. Eighteen (18) of the inmates expressed feeling comfortable to talk with staff and that staff were responsive to their concerns. Only half of the inmates were aware that they could make a report without having to provide their name.

All interviewed staff reported that they have multiple means to privately report sexual abuse or harassment. Such reporting opportunities included the ethics hotline, comment box, internal investigations, warden, or medical staff. The interviewed line staff reported that the inmates can privately report by using a resident request form, the hotline number, COP Out form, grievance, warden, officers, other staff, family, or friends. Such reports can be made

verbally or in writing. All of the interviewed line staff reported that if an inmate verbally or in writing reports sexual abuse or harassment the allegation is taken seriously and responded to immediately.

No inmates disclosed that they have ever reported to authorities, either in person or in writing, that they had been sexually abused or harassed while at the facility.

Corrective Action:

None

Standard 115.52 Exhaustion of administrative remedies

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

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

This standard directs the facility’s efforts in how inmates may use the grievance system for PREA allegations.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 12, 13
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,6,10,20
- FP 3 E1 Inmate Rights – Pg. 1,2,3
- Admission & Orientation Booklet Re: PREA
- Grievance Packet re: Alleged Sexual Abuse (Past 12 Mo) (Blank)
 - o Inmate Grievance Form #1 (Blank Sample)
 - o Inmate Grievance Form #2 (Blank Sample)
 - o Grievance Response (Blank Sample)
 - o Notice of Extension (Blank Sample)
 - o Regional Administrative Remedy Appeal (Blank Sample)
 - o Central Office Administrative Remedy Appeal (Blank Sample)
- Disciplinary Packet Re: False Claims of PREA Related Assaults (Blank)
- Sexual Assault Investigation Packet (Blank)
- Incident Report (Blank Sample)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

(a) The Giles W. Dalby Correctional Facility has an administrative process to address inmate grievances regarding sexual abuse.

(b) (b)(1) The facility does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. An inmate can submit a grievance any time regardless of when the incident is alleged to have occurred.

(2) According to staff interviews, the facility does not require an inmate to use any informal grievance process as it relates to PREA, or to attempt to resolve the issue with staff, for an alleged incident of sexual abuse.

(c) According to Staff Interviews, the facility ensures that:

(1) Inmates who allege sexual abuse submit the grievance without submitting it to a staff member who is involved in the allegation. Grievance forms can be obtained from the Law Library, housing control, shift supervisors, case manager, the grievance Officer or ask any staff member; they may mail it to the warden, and

(2) The grievance is not referred to a staff member who is involved in the allegation.

(d) (1) Staff interviews indicated that if an inmate files a grievance, the facility issues a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Staff interviews indicated no grievances were filed for the past 12 months.

(2) An interview with the Grievance Officer indicated that computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.

(3) MTC policy requires The Giles W. Dalby Correctional Facility to notify the inmate in writing when the organization files for an extension, including notice of the date by which a decision will be made.

(e)(1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and also be permitted to file requests on behalf of inmates.

(2) If a third party files such a request on behalf of an inmate, the facility will require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.

(f)(1) The facility has established procedures for filing emergency grievances alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

According to interviews, when the facility receives an emergency grievance alleging an inmate is at substantial risk of imminent sexual abuse, the staff immediately forwards the grievance for investigations.

(g) Inmate documentation indicated that the facility may discipline an inmate for filing a grievance related to alleged sexual abuse when the inmate filed the grievance in bad faith.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews, in the past 12 months zero grievances were filed alleging sexual abuse.

Corrective Action:

None

Standard 115.53 Inmate access to outside confidential support services

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

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

This standard directs the facility’s effort at providing inmates with access to support services and legal representation.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 16
- Admission & Orientation Booklet Re: PREA Support Services
- PREA Signage
- MOU Re: Rape Crisis Center
- Memo to Inmates Prior to Hotline
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Inmates
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address to the Lubbock Rape Crisis Center and their hotline number. An interview with the Facility PREA Compliance Manager and a Memo from the Warden indicated that The Giles W. Dalby Correctional Facility is a private contract facility tasked with the obligation to house adult male criminal alien inmates.
- (b) The Giles W. Dalby Correctional Facility informs inmates prior to them communicating with outside organizations that phone calls may be monitored and that reports of sexual abuse or sexual violence will be forwarded to authorities in accordance with mandatory reporting laws. Inmates receive this information in their Admission and Orientation Booklet. However, inmate interviews indicated concerns of not being able to report outside the facility confidentially on the phone without being recalled.
- (c) The Facility maintains a memorandum of understanding with the Lubbock Rape Crisis Center. The agreement was entered into on January 29, 2016. The center provides inmates with confidential emotional support services related to sexual abuse. The facility maintains a copy of the agreement of file.

Overall Interview Results:

Thirteen (13) of the twenty (20) interviewed inmates stated they were not aware of services outside of the facility dealing with sexual abuse or harassment. Many of the limited English speaking inmates struggled with the question and understanding what “services” meant. Even with additional explanation from an interpreter they struggled with understanding what the scope of outside advocacy and counseling services entailed. The inmates who were aware stated that they recall seeing information on the posters for the hotline number, and they could speak to a counselor/psychiatrist. Only two (2) of the inmates could recall seeing the mailing address for outside counseling services. Most the inmates could recall information related to immigrant services and how to access the rape crisis hotline number.

The inmate handbook provided mailing addresses and telephone numbers for outside victim advocacy and support, the local rape crisis center, and immigrant services. The handbook set up did not clearly delineate how the inmates could access outside supportive services in a confidential manner; therefore recommendation was made to change the set up and to educate the inmates on confidential access to outside support systems. In addition, the current Rape Crisis Hotline number available to the inmates does not provide confidential reporting, therefore it has also been recommended that the hotline set up is adjusted so the calls are not being recorded.

Corrective Action:

Inmate interviews indicated concerns of not being able to report outside the facility confidentially on the phone without being recalled. And there are concerns on what process inmates use to report outside entity confidential without the agency getting involved.

Verification:

The facility released an inmate poster instructing inmates that when placing a call to the local crisis center (*820) it may be recorded. Therefore, the Giles W. Dalby Correctional Facility allows the inmate to write anonymously and confidentiality to the Lubbock Rape Crisis Center. All inmates that want to write should NOT place their name or address on the envelope, the only thing on the envelope should be Confidential: Lubbock Rape Crisis Center Address.

Standard 115.54 Third-party reporting

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

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

This standard requires the facility to establish a third party reporting mechanism for sexual abuse or harassment.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- MTC Website Re: PREA Contact representative Data

- Visitation Pamphlet Re: Corporate Contact Data
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews with the following:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

Findings (By Provisions):

The Giles W. Dalby Correctional Facility uses the MTC website page as their method of third-party reporting of sexual abuse and sexual harassment. The public is made aware through a visitor’s information and pamphlet.

Corrective Action:

None

Standard 115.61 Staff and agency reporting duties

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

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

This standard requires the facility to implement staff and facility reporting duties.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 7-9
- 903E.02 Ensuring Safe Prisons – Pg. 1, 13 – 14
- Sexual Assault Medical Packet (Blank)
- Sexual Assault Investigation Packet (Blank)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Random Officers
 - o Medical Staff

Findings (By Provisions):

- (a) Facility policy requires staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether it is part of the agency; retaliation against inmates or staff who reported the incident; as well as staff neglect or violation of responsibilities that contributed

to the incident or retaliation. This policy information was confirmed by staff interviews.

- (b) Facility policy requires, apart from reporting to the designated supervisors or officials and designated state or local services; staff is prohibited from revealing any information related to a sexual abuse incident to anyone other than to make treatment, investigation, and other security and management decisions.
- (c) If sexual abuse incidents were to occur at Giles facility, staff interviews indicated that the facility will report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, initially to the facility's designated investigators and from there to Garza County Sheriff Department.

Overall Interview Results:

One hundred (100%) of the eighteen (18) staff interviewed reporting being aware of the agency's procedure for reporting any information related to an inmate sexual abuse. Interviewed staff could clearly articulate the necessity to report any incident or alleged incident of sexual abuse or harassment immediately. They are aware of various methods of reporting in writing or verbally to include but not limited to: report to shift supervisor, ethics hotline, intelligence sheet, medical staff, and internal investigations.

The Giles Dalby Correctional Facility exceeded expectations in that they review PREA standards related to staff reporting during shift briefings.

Corrective Action:

None

Standard 115.62 Agency protection duties

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

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

This standard addresses the facility's protection duties.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 14
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 5
- FP 3 D1 Special Housing Unit – Pg. 1,2, 10
- BP 292 Re: Length of Placement in SHU Due to Risk of Sexual Victimization (Black)
- Detention Order Re: Staff Admit PC Due to Risk of Sexual Victimization (Black)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:

- Sr. VP MTC Corrections (Agency Head)
- Sr. Director, Management & Operations (Agency PREA Coordinator)
- Director, Policy & Audits (Assistant Agency PREA Coordinator)
- Facility Warden
- Random Officers

Findings (By Provisions):

- (a) When the Giles W. Dalby Correctional Facility learns that an inmate is at substantial risk of imminent sexual abuse, it takes immediate action by offering the inmate to move to special housing or protection custody until the matter is resolved.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, in the past 12 months there were zero occasions where the facility has determined that an inmate was subject to substantial risk of imminent sexual abuse.

Overall Interview Results:

All the interviewed staff could clearly articulate the response process if an inmate is at risk of imminent sexual abuse. Many of the staff reported that action is taken to address an inmate who is at risk of sexual abuse by immediately notifying the supervisor, stay with the victim, possibly seek solitary confinement, separate the involved parties, and seek medical care if necessary. Most of the staff articulated that information would only be shared with necessary parties.

Corrective Action:

None

Standard 115.63 Reporting to other confinement facilities

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

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

This standard directs the facility to report any allegations received from a resident that may have occurred at another confinement facility.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 14
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 9
- Memo Re: Sexual Abuse Allegations from Prior Facility

- Documentation Re: 72 Hours Notification to Sending Unit
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility has not received any allegation that an inmate was sexually abused while confined at another facility. Per staff interviews, if the facility did receive an allegation the facility would notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.
- (b) The facility provided a blank “72 Hour PREA Notification – Form Letter” that would be generated if an inmate alleged sexual assault or sexual harassment.
- (c) Staff interviews indicated that if receiving allegations were reported from other facilities, they would complete an incident report for investigations.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, during the past 12 months zero allegations were received by the facility that an inmate was abused while confined at another facility.

Corrective Action:

None

Standard 115.64 Staff first responder duties

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

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

This standard directs the facility’s first responder’s actions.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons Pg. 1, 14, 15
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 15, 16
- First Responder – Training ID Cards
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails

- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Random Officers
 - o Security Staff First Response
 - o Non-Security Staff First Response
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) Interviews with staff and staff training indicated when staff learn of an allegation that an inmate is sexually abused, the first security staff to respond separates the victim and abuser; preserves and protects the crime scene; and if the incident occurred within the appropriate time period for the collection of physical evidence, they will request that the alleged victim not take actions that could destroy physical evidence, to include washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- (b) According to non-security staff, if they are the first responder they will request that the alleged victim not take any actions that could destroy physical evidence, and notify security staff.

Overall Interview Results:

Interviews were conducted with eighteen (18) security staff who might be required to be first responders. All the interviewed staff consistently reported that the duties of a first responder to include but not limited to the following: take immediate action, stay with the inmate, separate the victim from the perpetrator, isolate/secure the scene and secure evidence, call for additional staff, and notify supervisor. Four (4) of the security staff also reported that they would send the victim to medical for an initial evaluation of his/her medical condition.

Corrective Action:

None

Standard 115.65 Coordinated response

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

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

This standard directs the facility to have a coordinated response plan for sexual abuse.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E 2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 14 – 19

- 903E.02 – Ensuring Safe Prisons – Pg. 1, 15
- Sexual Assault Packet
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden

Findings (By Provisions):

The facility policy response protocol provided guidelines for staff a written plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. According to documentation the time frames of notifications are:

- o Security: Memo from First Responder – Immediately
- o Security: PREA Manager Notification / Duty Warden / SIS – Immediately
- o Security: Notify Sexual Assault Victim Advocate Notification – Immediately
- o Security: BP –Ao583 Referral to Bureau of Prison – 24 Hours
- o Investigation: Evidence Collection & Photo’s – 8 Hours
- o Investigation: Video Collection – 8 Hours
- o Medical: Sexual Assault Form – Immediately
- o Investigation: Inmate & Employee Statement – Immediately
- o Investigation: Inmate Affidavit – 8 Hours
- o Human Resource: Employee Affidavit – 8 Hours
- o Investigation: Criminal Investigation Referral (Outside Agency) 48 Hours
- o Medical: Inmate Injury Assessment & Follow-up – Will Vary
- o Investigation: BP-Ao586 – After Action Review Report – 72 Hours
- o PREA Review Team Assessment – Will Vary

Corrective Action:

None

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

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

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

This standard is not applicable because there are no collective bargaining units or unions operating at facility or agency.

This standard is rated non-applicable.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Facility Contract Re: Contractual Requirements (Non-Union)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 3
- Memo Re: Union Contracts or Collective Bargaining Agreements
- Employee Offer Letter Re: Employment Requirements (Blank)
- Interviews:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

Findings (By Provisions):

- (a) Staff interviews and documentation indicated that Giles W. Dalby Correctional Facility current contractual obligations with the Federal Bureau of Prisons are not dependent upon union contracts or collective bargaining agreements. For the period of March 1, 2014 through August 2016 the facility nor Management and Training Corporation (MTC) has entered into any collective bargaining agreements or any other agreement that would limit MTC’s ability to remove alleged staff sexual abusers from contact with inmates.

Corrective Action:

None

Standard 115.67 Agency protection against retaliation

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

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

This standard directs the facility in its effort to protect inmates and staff from retaliation.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 3
- 903E.02 Ensuring Safe Prisons – Pg. 1, 15
- FP 3 E1 Inmate Rights – Pg. 1, 2, 4
- Admission & Orientation Booklet Re: Staff Support contact Data
- Memo Re: Protective Measures, Monitoring Efforts, and Retaliation
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:

- Sr. VP MTC Corrections (Agency Head)
- Sr. Director, Management & Operations (Agency PREA Coordinator)
- Director, Policy & Audits (Assistant Agency PREA Coordinator)
- Facility Warden
- Monitoring Retaliation
- Inmates Placed in Segregated Housing
- Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility prohibits retaliatory behavior by inmates or staff in regards to the reporting of sexual abuse, sexual harassment or cooperation with investigators as it relates PREA related incidents and allegations. Inmate rights documentation and staff policy establishes expected conduct. The facility PREA Compliance Manager is responsible for monitoring retaliation along with special investigations personnel to investigate and monitor inmates as it relates to PREA allegations and incidents.
- (b) The facility has several protection and reporting measures, for inmates. They can utilize the “Grievance Program” to document retaliatory acts or other PREA related concerns and issues. The process is over-seen by the facility Grievance Investigator who works in concert with the facility administrators and facility investigators to ensure privacy and policy compliance. The facility has the option to change inmate housing or transfer inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.
- (c) The facility reported that there is no retaliation for this audit reporting period. However, if the facility were to have issues with retaliation the policy will guide them on this standard. For example, for at least 90 days following a report of sexual abuse, the facility monitors the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and act promptly to remedy any retaliation. Items the facility should monitor include inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility continues monitoring beyond 90 days if the initial monitoring indicates a continuing need.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, there were zero incidents of retaliation that occurred in the past 12 months.

Corrective Action:

None

Standard 115.68 Post-allegation protective custody

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This standard gives guidelines on inmate restrictive housing.

Supporting Documents, Interviews and Observation:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 5
- FP 3 D1 Special Housing Unit – Pg. 1-3
- Detention Order Re: Staff Admit to Segregation Due to Alleged Sexual Assault (Blank)
- BP 292 Re: Staff Admit to Segregation Due to Alleged Sexual Assault (Blank)
- Sexual Assault Investigation Packet (Blank)
- Sexual Assault Medical Packet (Blank)
- Special Housing Review (Blank)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Staff Supervise Inmates In Segregated Housing
 - o Inmates Placed in Segregated Housing

Findings (By Provisions):

- (a) The facility’s use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is based on the requirements of standard 115.43. Interviews and documentation review at Giles W. Dalby Correctional Facility indicated that inmates at high risk for sexual victimization are prohibited from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Interviews also reveal that if an assessment cannot be immediately completed, the facility will hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

Corrective Action:

None

Standard 115.71 Criminal and administrative agency investigations

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

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

This standard directs the facility in regards to administrative and criminal investigations.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 15, 16
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program, Pg. 1, 10, 11, 12
- MOU Re: responsible Agency for Investigating Sexual Assaults
- Garza County – Sexual Assault Protocol
- Facility Contract Re: Records Retention
- Garza County – Investigator Training Documentation
- Garza County – PREA Investigator Training Certificates
- Facility PREA Investigator Training Certificates
- FBI/OIG Correspondence Re: Training Requirements
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Facility PREA Compliance Manager
 - o Investigator
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) Interviews with the Facility PREA Investigator indicated that when they conduct investigations into allegations of sexual abuse and sexual harassment, they do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
- (b) The Giles W. Dalby Correctional Facility uses investigators who have received special training in sexual abuse investigations. The Facility PREA Investigators and the Garza County Sheriff Department Investigators have completed the ACA PREA Investigation Protocols. The facility provided an email referencing Assistant Special Agent in Charge (ASAC) Scott Barden. He organized the PREA training for the agents. He provided an email with attachment to the PREA Commission partly so every BOP institution would not be required to ask the OIG for proof of training. It was his understanding that the PREA audit should not ask for proof of the training since he already advised the commission of the training.
- (c) Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.
 - Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse and documented description of the physical and testimonial evidence, and investigative facts and findings.
- (d) When Garza County Sheriff Department investigates sexual abuse, the Giles W. Dalby Correctional Facility cooperates with Garza investigators and endeavors to remain informed about the progress of the investigation.

Corrective Action:

None

Standard 115.72 Evidentiary standard for administrative investigations

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

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

This standard is related to the evidentiary standard used for administrative investigations.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1, 16
- Garza County – PREA Investigator Training Certificates
- Facility PREA Investigator Training Certificates
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 10, 11, 12
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Investigator

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility and the Garza County Sheriff Department investigators impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Corrective Action:

None

Standard 115.73 Reporting to inmates

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

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

corrective actions taken by the facility.

This standard establishes the reporting process relating to the outcome of an investigation.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- 903E.02 Ensuring Safe Prisons – Pages 1, 16
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 10, 11, 19, 20
- Memo Re: Reporting to inmates
- Inmate Notification Memo
- Inmate Notification Log (Tracking Form)
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Investigator
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) After investigating an inmate's allegation that he has suffered sexual abuse, the facility has a process in place to inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the allegation was against a staff, then the inmate is informed per the provisions of this standard.
- (b) When the Giles W. Dalby Correctional Facility notifies inmates, it uses the Notification of Outcome of Investigation letter and documented on the PREA Notification Log.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, there were zero investigations of alleged inmate's sexual abuse that were completed by the facility in the past 12 months. There were also zero investigations of alleged inmate's sexual abuse that were completed by an outside agency in the past 12 months.

Corrective Action:

None

Standard 115.76 Disciplinary sanctions for staff

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

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

corrective actions taken by the facility.

This standard directs the facility's efforts at disciplining staff who have violated the requirements of PREA.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1. 16
- 203.1 Rules of Conduct – Pg. 1, 2, 3
- Employee Terminations Re: Sample Documentation Utilized (Blanks)
- Memo Re: Employees Disciplined for sexual harassment w/out termination
- Memo Re: Disciplinary Sanctions for Staff
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

Findings (By Provisions):

- (a) MTC and Giles W. Dalby Correctional Facility policies requires staff to be disciplinary sanction up to and including termination for violating sexual abuse or sexual harassment policies, and termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
- (b) Disciplinary sanctions for violations of policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the allegations committed, the staff disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
- (c) According to staff interviews all terminations for violations of facility sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, in the past 12 months zero staff from the facility that has violated sexual abuse or sexual harassment policies. In the past 12 months, zero staff from the facility that has been terminated for violating facility sexual abuse or sexual harassment policies.

Corrective Action:

None

Standard 115.77 Corrective action for contractors and volunteers

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This standard provides guidance to the facility as it relates to disciplinary sanctions against a contractor or volunteer.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- 903E.02 Ensuring Safe Prisons – Pg. 1. 17
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 20, 21
- Memo Re: Measures Taken to Prohibit Contact with Inmates
- Memo Re: Referrals of Allegations Sexual Abuse/Harassment to Law Enforcement or Licensing Bodies
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden

Findings (By Provisions):

- (a) Staff interviews indicated that any contractor or volunteer who engages in sexual abuse are prohibited from contact with inmates and are reported to law enforcement. The Giles W. Dalby Correctional Facility investigates all alleged sexual abuse and harassment by Management and Training Corporation (MTC) and contract employees. Upon knowledge of an alleged sexual abuse claim the Garza County Sheriff’s Department is notified regarding information relating to abuse allegation. If a volunteer or contract staff is under investigation for alleged inmate sexual abuse or sexual harassment the individual is placed on paid administrative leave pending the outcome of the investigation.

According to a review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview, in the past 12 months, zero contractors/volunteers were reported to law enforcement for engaging in sexual abuse of inmates.

Corrective Action:

None

Standard 115.78 Disciplinary sanctions for inmates

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

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

This standard directs the facility’s disciplinary sanctions against inmates for violation of sexual abuse or harassment of staff or an inmate.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1, 20
- PS 5270.09 Inmate Discipline Program Re: Inmates w/mental Disabilities & Sanction Table – Pg. 1,21,41,45,46,48
- Disciplinary Hearing Officer Report Packet Re: Sexual Conduct with Staff (Blank)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Medical Staff
 - o Mental Health Staff

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility has a formal inmate disciplinary process when an inmate is subject to a disciplinary sanction following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
- (b) The disciplinary process allows sanctions to commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories within the facility.
- (c) In the Inmate Discipline Program chapter 3, 541.6 Mentally Ill Inmates, it considers whether an inmate’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed. The facility offers counseling and other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.
- (d) Staff interviews indicated for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, if an investigation does not establish evidence sufficient to substantiate the allegation.

Corrective Action:

None

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

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

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

corrective actions taken by the facility.

This standard directs the facility on conducting medical and mental health screening and history of sex abuse.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program – Pg. 1,3,4,5
- MTC A 29 Mental Health Screening – Pg. 1 – 3
- MTC A 2 – 31 Mental Health Evaluations – Pg. 1, 2
- Intake Screening Form re: Prior PREA Related History
- Attachment A. PREA Intake Objective Screening Instrument
- BP A0519 Psychology Service Questionnaire Re: Prior Sexual Victimization and Consent
- Psychology Progress Note Re: Prior Sexual Victimization
- Medical Assessment Re: Tracking Log
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Medical Staff
 - o Staff Screening for Risk of Victimization and Abusiveness
 - o Inmates Disclosed Sexual Victimization

Findings (By Provisions):

- (a) Staff interviews and documentation review indicates that inmates that have experienced prior sexual victimization, whether it occurred in an institutional setting or in the community are offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. As part of the Intake Receiving Screening, an inmate is evaluated for current or chronic mental health problem, suicidality, and for history of sexual abuse, victimization or abusiveness. Trained Health Services staff perform the screening in a confidential manner. A mental health professional offers an inmate with a history of sexual victimization or sexual abusiveness a follow-up meeting within 14 days of the intake screening.
- (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.
- (c) According to the Giles W. Dalby Correctional Facility staff indicated that if an inmate reports a history of sexual abuse or sexual abusiveness appears at risk for victimization, security and case management are notified. Any information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to need-to-know staff only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education and programming assignments.
- (d) The Giles W. Dalby Correctional Facility uses the BP-A0519 Psychology Service Questionnaire Re: Prior Sexual Victimization and Consent form for medical and mental health practitioners to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

Overall Interview Results:

One (1) inmate was interviewed that disclosed prior sexual victimization. The inmate recalled speaking with staff upon admission about prior victimization however could not recall further discussing with medical staff. He stated

that everyone received the admission and orientation handbook and video, but didn't pay much attention to it.

Corrective Action:

None

Standard 115.82 Access to emergency medical and mental health services

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

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

This standard directs the facility in providing access to emergency medical health services.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 12, 15 – 17
- MTC C 13 Sexual Assault Pg. 1,2
- Medical Sexual Assault Examination Packet (Blank)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Medical Staff
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

(a) At the Giles W. Dalby Correctional Facility inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Alleged victims of sexual assault are promptly triaged at the Health Services Unit. Information is gathered and a brief examination of physical injury will take place, taking care to preserve medical evidence. The Health Services staff person is consulted to determine if transfer to an Emergency Department is required.

If the inmate is medically stable, the inmate is requested to consent to a full physical examination off-site after triaging. A written consent is required before the exam, collection of evidence, or treatment can begin. The inmate is then transferred by MTC vehicles, if possible, to University Medical Center Emergency Department for the sexual assault exam. Rape crisis volunteers are also available if needed.

(b) Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally

accepted standards of care, where medically appropriate. The facility offer prophylactic treatment and follow-up for sexually transmitted and other communicable diseases to all victims, as appropriate.

- (c) Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Corrective Action:

None

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

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

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

This standard directs the facility’s ongoing medical and mental health care for sexual abuse victims and abusers.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 12, 17-19
- MTC A 29 Mental Health Screening Pg. 1-3
- MTC A 31 Mental Health Evaluations Pg. 1, 2
- MTC C 13 Sexual Assault Pg. 1, 2
- Facility Contract Re: Contractual Requirements (Inmate Type & Gender)
- Medical Sexual Assault Examination Packet
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Mental Health Staff
 - o Inmates Reported Sexual Abuse

Findings (By Provisions):

- (a) The Giles W. Dalby Correctional Facility offers medical and mental health evaluation and, provides treatment to all inmates who have been victimized by sexual abuse.
- (b) Staff interviews indicated that evaluations and treatment of victims include follow-up services, treatment plans, referrals for continued care following inmates transfer to, or placement in, other facilities, or their release from custody.

- (c) The facility provides victims with medical and mental health services consistent with the community level of care.
- (d) Staff interviews indicated that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.
- (e) MTC policy requires facility treatment services provided to victims without financial cost.
- (f) The facility conducts a mental health evaluation of inmate-on- inmate abusers of learning of abuse history and offer treatment. If the inmate reports history of sexual abuse or abusiveness appears at risk for victimization, security and case management are notified.

Corrective Action:

None

Standard 115.86 Sexual abuse incident reviews

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

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

This standard directs the facility’s efforts at reviewing and sexual abuse incident that occurred at the facility.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- FP 3 E2 Sexual Abuse Assault Prevention & Intervention Program Pg. 1, 21
- BP A0586 After Action Review Report (Blank)
- Incident Review Team – Minutes and Reports Re: Findings and Recommendations
- Sexual Assault Investigation Packet (Blank)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)
 - o Facility Warden
 - o Facility PREA Compliance Manager
 - o Incident Review Team

Findings (By Provisions):

- (a) Staff interviews indicated that if the facility had a sexual abuse, the facility will conduct a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless

the allegation has been unfounded. Investigations reviews occur within 30 days of the conclusion of the investigation. The facility provided PREA Team Review Meetings as review documentation.

- (b) The review team includes upper-level management officials, the Associate Wardens, Captain, SIS staff, Health Service Administrator, and Psychologist, and other staff as deemed necessary by the Warden.
- (c) According to interviews the review team will use the information from the sexual abuse incident review to identify any policy, training, or other issue related to the incident that indicated a need to change policy or practice.

Corrective Action:

None

Standard 115.87 Data collection

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

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

This standard guides the facility in its data collection efforts.

Supporting Documents, Interviews and Observations

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- MTC PREA Statistics
- Interviews with the following:
 - o Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

Findings (By Provisions):

- (a) MTC collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions as required by MTC Policy, 903E.02, Ensuring Safe Prisons. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. MTC aggregates the incident-based sexual abuse data at least annually and generates a comprehensive and informative annual report. Each MTC facility is required by policy to maintain, review and collect data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews.

Interviews indicated MTC has a very sophisticated data system enabling the company to collect and report accurate data to answer all questions on the Survey of Sexual Violence and the system is set up to answer

them sequentially. Additionally, the system has the capability for generating valuable reports including the following: PREA Allegations and Investigations Summary Report, PREA Allegations and Investigations Report by Site, Investigations by Facility, Master Investigation Log, Maser Investigation Log by Site and others.

The reviewed 2015 MTC Annual Report was comprehensive and detailed and included Demographics of MTC Operated Facilities as well as detailed PREA Data.

- (b) The agency aggregated incident-based sexual abuse data at least annually.
- (c) The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- (d) The agency maintains, reviews, and collects data as needed from all available incident- based documents, including reports, investigation files, and sexual abuse incident reviews.
- (e) The agency also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.
- (f) Upon request, the agency will provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Corrective Action:

None

Standard 115.88 Data review for corrective action

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

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

This standard directs the facility efforts at reviewing data for corrective action.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- MTC PREA Statistics
- Interviews with the following:
 - o Sr. VP MTC Corrections (Agency Head)
 - o Sr. Director, Management & Operations (Agency PREA Coordinator)
 - o Director, Policy & Audits (Assistant Agency PREA Coordinator)

- Facility PREA Compliance Manager

Findings (By Provisions):

- (a) The MTC and the Giles W. Dalby Correctional Facility review data collected and aggregated pursuant to § 115.87 to assess and improve the effectiveness of the facility’s sexual abuse prevention, detection, and response policies, practices, and training, including by identifying problem areas, taking corrective action on an ongoing basis. Interviews reveal that the MTC prepares an annual report of its findings and corrective action that includes the Giles W. Dalby Correctional Facility and the agency.
- (b) The report includes a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse.
- (c) The report is approved by the MTC agency head and made readily available to the public through its website.
- (d) The MTC redact specific material from the reports that would present a clear and specific threat to the safety and security of a facility.

Corrective Action:

None

Standard 115.89 Data storage, publication, and destruction

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

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

This standard directs the facility in its efforts to comply with data storage, publication, and destruction of records related to PREA.

Supporting Documents, Interviews and Observations:

- Management & Training Corporation (MTC) Policy Serial Number 903E.02 (August 1, 2016)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews with the following:
 - Sr. VP MTC Corrections (Agency Head)
 - Sr. Director, Management & Operations (Agency PREA Coordinator)
 - Director, Policy & Audits (Assistant Agency PREA Coordinator)

Findings (By Provisions):

(a) MTC the parent company aggregated sexual abuse data from the Giles W. Dalby Correctional Facility under its direct control is made readily available to the public at least annually through its website. Before making aggregates sexual abuse data publicly available MTC removes all personal identifiers

(b) MTC Maintains sexual abuse data collected for at least 10 years after the date of initial collection.

Corrective Action:

None

AUDITOR CERTIFICATION

I certify that:

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

Adam T. Barnett Sr.

April 26, 2017

Auditor Signature

Date