

## Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim       Final

Date of Report    May 17, 2018

### Auditor Information

Name: Adam T. Barnett	Email: Adam30906@gmail.com
Company Name: Diversified Correctional Services, LLC	
Mailing Address: 2010 Bonnie Place	City, State, Zip: Augusta, Ga. 30906
Telephone: 404-683-6844	Date of Facility Visit: April 16-18, 2018

### Agency Information

Name of Agency: Management & Training Corporation		Governing Authority or Parent Agency (If Applicable): Texas Department of Criminal Justice	
Physical Address: 500 North Market Place Drive		City, State, Zip: Po Box 99 Huntsville, Texas 77342	
Mailing Address: P.O. Box 10 Centerville, Utah 84014		City, State, Zip: Click or tap here to enter text.	
Telephone: 801-693-2600		Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
The Agency Is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency mission: MTC will be a leader in social impact by:• Preparing youth for employment and citizenship;• Preparing offenders to successfully transition into communities;• Providing quality health care and promoting healthy lifestyles;• Providing greater opportunity for citizens globally through economic and social development; and • Investing in communities.			
Agency Website with PREA Information: www.mtctrains.com			

### Agency Chief Executive Officer

Name: Scott Marquardt	Title: President and CEO
Email: scott.marquardt@mtctrains.com	Telephone: 801-693-2800

### Agency-Wide PREA Coordinator

Name: Mark Lee	Title: Director Corrections/Corporate, PREA Coordinator
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<b>Email:</b> mark.lee@mtctrains.com	<b>Telephone:</b> 801-693-2864
<b>PREA Coordinator Reports to:</b> Bernie Warner, Senior Vice President	<b>Number of Compliance Managers who report to the PREA Coordinator</b> 24

**Facility Information**

<b>Name of Facility:</b>	Bridgeport Correctional Center		
<b>Physical Address:</b>	4000 North 10 <sup>th</sup> Street, Bridgeport TX 76426		
<b>Mailing Address (if different than above):</b>	Same as above		
<b>Telephone Number:</b>	940-683-3010		
<b>The Facility Is:</b>	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	

**Facility Mission:** It is the mission of the Bridgeport Correctional Center to maintain a facility that is safe for both staff and offenders. The facility shall operate in a humane fashion, while maintaining custody and control of the offenders. We shall strive to offer programs that are beneficial to offenders and work diligently to offer reintegration programs that will provide offenders the best opportunities to succeed when released back into society. The facility shall provide all the services outlined in the Contractual Agreement in a cost efficient manner. It is imperative that the facility maintains a good working relationship with the client, the staff and the community.

**Facility Website with PREA Information:** www.mtctrains.com

**Warden/Superintendent**

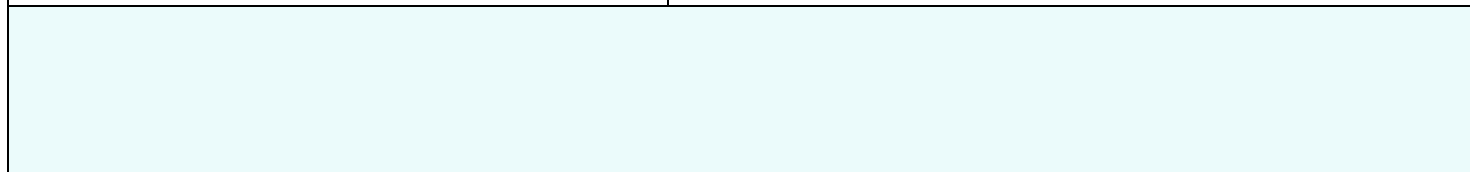
<b>Name</b> Jennifer Brown	<b>Title:</b> Warden
<b>Email:</b> Jennifer.Brown@MTCTrains.com	<b>Telephone:</b> 940-683-3010 Ext 101

**Facility PREA Compliance Manager**

<b>Name:</b> Donald Shaw	<b>Title:</b> Major
<b>Email:</b> Donald.Shaw@MTCTrains.com	<b>Telephone:</b> 940-683-3019 Ext 109

**Facility Health Service Administrator**

<b>Name:</b> Patty Outlaw	<b>Title:</b> RN-SNM-CA
<b>Email:</b> paoutlaw@UTMB.EDU	<b>Telephone:</b> 940683-3010 Ext 145



### Facility Characteristics

<b>Designated Facility Capacity:</b> 520		<b>Current Population of Facility:</b> 504	
<b>Number of inmates admitted to facility during the past 12 months</b>			745
<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</b>			745
<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</b>			745
<b>Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:</b>			0
<b>Age Range of Population:</b>	<b>Youthful Inmates Under 18:</b> N/A	<b>Adults:</b> 18 - 100	
<b>Are youthful inmates housed separately from the adult population?</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<b>Number of youthful inmates housed at this facility during the past 12 months:</b>			N/A
<b>Average length of stay or time under supervision:</b>			0
<b>Facility security level/inmate custody levels:</b>			Min/G2
<b>Number of staff currently employed by the facility who may have contact with inmates:</b>			108
<b>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</b>			61
<b>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</b>			1

### Physical Plant

<b>Number of Buildings:</b> 1		<b>Number of Single Cell Housing Units:</b> 4	
<b>Number of Multiple Occupancy Cell Housing Units:</b>		260	
<b>Number of Open Bay/Dorm Housing Units:</b>		None	
<b>Number of Segregation Cells (Administrative and Disciplinary):</b>		4	
<b>Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):</b>			
Cameras are placed throughout the facility in common areas, but not in any cells.			

### Medical

<b>Type of Medical Facility:</b>	8 hours Medical Department
<b>Forensic sexual assault medical exams are conducted at:</b>	Wise Regional Health System Emergency Room

### Other

<b>Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:</b>	142
<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b>	2

# Audit Findings

## Audit Narrative

*The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, and observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.*

The PREA audit of the Bridgeport Correctional Center (BCC), "The Facility" operated by the Management and Training Corporation (MTC) for the Texas Department of Criminal Justice (TDCJ) was conducted April 16 -18, 2018. The Auditor arrival date was April 15, 2018.

### Pre-Audit:

During the Pre-Audit period, the facility received instructions to Post the Required PREA Audit Notice of the upcoming audit prior to the audit for confidential communications. As of April 14, 2018, there were no communications from inmates or staff. The Pre-Audit Questionnaire was completed and sent to the auditor as required.

The audit process was not a team approach. The Auditor completed a documentation review using the Pre-Audit Questionnaire, internet search, policies and procedures review, and additional documentation provided on the flash drive, to include both the Agency and the Facility policy and procedures, Agency Mission Statement, Daily population report and schematic/layout for the facility. The PREA compliance Manager confirmed that all information on the Pre-Audit Questionnaire is accurate. 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 occurred with the facility.

The facility informed the auditor that MTC Regional Trainer, who is a DOJ Certified Auditor conduct a mock audit and all non-compliances were corrected pride to the facility on-site audit.

### On-Site:

On Monday, April 16, 2018, the entrance conference was held and attended by:

- Warden
- Facility PREA Compliance Manager
- Facility Compliance Manager
- Facility Nurse Manager/Clinic Administrator
- Executive Secretary
- Classification Chief
- Food Service Manager
- Major
- Administrative Lieutenant
- Contract Monitor
- Human Resources

- Fire & Safety Manager
- Grievance Coordinator
- Chaplain
- Administrative Sergeant
- DOJ Certified PREA Auditor

Welcomes were given by the Warden, Facility PREA Compliance Manager and the Administrative Sergeant. The Auditor was introduced, and the PREA Audit Agenda was reviewed and discussed. Additional pre-audit information requested weeks prior to on-site visit obtained.

**Tour:**

On the first day of the audit after the entrance conference, the Auditor toured the physical plant escorted by the Warden, Compliance Manager, Contract Monitor Major, Administrative Lieutenant and the Administrative Sergeant. It was requested that when the audit paused to interact with inmates and/or staff, to please step away so the conversation may remain private.

The Auditor spoke informally with inmates and staff during the tour which covered Intake, reception, screening area, housing units, segregated housing, Medical/Mental Health, Recreation, cafeteria, programming areas, education, visitation areas, outside recreational, Gym, etc.

During the tour of the physical plant, the Auditor observed the location of video monitoring cameras. The facility camera system consists of 118 camera placed in all offender housing and common areas. The system is designed to record up to 14 days of data to a DVR system. All of the recording equipment and monitors are located in the main control room. A review of all data recorded from the cameras can be accessed from the central control monitoring station, Warden’s Office and the Major’s Office. It was noted that only the Shift Supervisors, Building Captain, Facility Major, and Warden have access to view recorded data.

Monitoring cameras are located in the kitchen and front entrance/gate house; Staff supervision of inmates, dorm layout including sleeping rooms and shower/toilet areas, commissary, placement of posters and PREA informational resources, security monitoring, inmate’s movement, 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 mid-section. The auditor was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility. During the tour, the auditor interacted with 9 staff members and 23 inmates.

**Observations:**

- Notices of the PREA audit were posted throughout the facility as required by the Auditor.
- The holding cells provide privacy for inmates to use the toilet.
- Segregated Cells provide privacy for inmates to use the toilet.
- The inmate's files are kept in secure area.
- PREA information is posted and is available in Non-English and English to include reporting information.
- The living area phones work.
- The cameras do not have a line of sight into cells, toilets and showers.
- The staff of the opposite gender announces their present when entering living units.
- There are private rooms where inmates can be seen by medical/mental health care staff.
- There are no youthful offenders.
- There were no new or renovated areas observed.

**Staff Interviews:**

The random staffs were selected, and the specialized staff was identified. Agency and Facility staff selected for interviews included:

<b>Staff Interviews and Interactions</b>	<b>#</b>
Agency Head or Designee (Director of Correction/Corporate) Previous	1
Agency PREA Coordinator / Designee (MTC Assistant PREA Coordinator) Previous	1
TDCJ – DFCMOD Compliance Specialist	1
<b>Warden</b> /Facility Director/ Superintendent or Designee (Deputy Warden/Operations)	1
Facility PREA Compliance Manager	1
Agency Contract Monitor	1
Intermediate or Higher Level Facility Staff Responsible for Unannounced Rounds	1
Medical Staff	1
Mental Health Staff	0
Non-Medical Staff Involved in Cross-Gender Strip or Visual Searches	1
Human Resources Staff	1
Volunteers Who have Contact with Inmates	4
Contractors Who have Contact with Inmates	1
Investigative Staff (Agency)	0
Investigative Staff (Facility)	2
Staff who Perform Screening for Risk of Victimization and Abusiveness	1
Staff on the Sexual Abuse Incident Review Team	1
Designated Staff Member Charged with Monitoring Retaliation	1
First Responder (Non-Security)	2
First Responder (Security)	2
Intake Staff	1
1st Shift Random Staff	4
2nd Shift Random Staff	3
3rd Shift Random Staff	3
<b>Total Number of Formal Staff Interviews</b>	<b>37</b>
Number of Specialized Staff and Leadership Interviews	27
Number of Random Staff Interviews	10
Staff Interactions During Tour	9
<b>Total Number of Staff Interactions</b>	<b>46</b>

Note: Four (4) staff member was interviewed using 3 sets of PREA question based on staff responsibilities.

**Inmate Interviews:**

On April 16, 2018, facility rated capacity 520 and the number of inmates housed during the first day of the audit was 504.

Inmates were selected from each housing unit roster. Prior to and/or during the entrance conference, the auditor and facility staff scheduled inmate interviews to include target inmates.

<b>Inmate Interviews and Interactions</b>	<b>#</b>
Youthful Inmates	0
Inmates with a Physical Disability	1
Inmates who are Blind, Deaf, or Hard of Hearing	0
Inmates who are LEP	1
Inmates who Identify as Transgender or Intersex	0
Inmates who identify as Lesbian, <b>Gay</b> , or Bisexual	1
Inmates in Segregated Housing	0
Inmates Who Reported Sexual Abuse or Sexual Harassment	0
Inmates Who Reported Sexual Victimization during Risk Screening	1
Inmates who are Randomly Selected from each Living Units	26
<b>Total Number of Formal Inmate Interviews</b>	<b>30</b>
Number of Random Inmate Interviews	26
Number of Targeted Inmates Interviews	4
Inmate Interactions During Tour	23
<b>Total Number of Inmate Interactions</b>	<b>53</b>

**Sample documentation requested:**

- Inmate Roster
- Youthful Inmate Roster (NA)
- Inmates with Disabilities
- LGBTI Inmates
- Inmates in Segregated Housing
- Inmates in Isolation
- Inmates who Reported Sexual Abuse
- Inmates who Reported Sexual Victimization During Risk Screening
- Staff Roster
- Specialized Staff
- Contractors who have contact with Inmates
- Volunteers who have contact with Inmates
- Grievances made in the 12 months preceding the audit
- Incident reports from the 12 months preceding the audit
- Allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit

## Facility Characteristics

*The auditor’s description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.*

MTC will be a leader in social impact by:

- Preparing youth for employment and citizenship;
- Preparing offenders to successfully transition into communities;
- Providing quality health care and promoting healthy lifestyles;

- Providing greater opportunity for citizens globally through economic and social development; and
- Investing in communities.

It is the mission of the Bridgeport Correctional Center (BCC) to:

“To maintain a facility that is safe for both staff and offenders. The facility shall operate in a humane fashion, while maintaining custody and control of the offenders. We shall strive to offer programs that are beneficial to offenders and work diligently to offer reintegration programs that will provide offenders the best opportunities to succeed when released back into society. The facility shall provide all the services outlined in the contractual agreement in a cost effect manner. It is imperative that the facility maintains a good working relationship with the client, the staff and the community”.

It is the mission of the Texas Department of Criminal Justice (TDCJ) to:

“To provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime.”

**Accreditations:**

- Bridgeport Correctional Center is accredited by the American Correctional Association (ACA)
- Correctional Education Association (CEA)

**Facility Background, Physical Plant, and Security Supervision:**

The facility was opened in 1989. The compound is surrounded by a single 10-foot chain link fence enhanced by a single roll of razor wire at the top and closed-circuit television cameras (CCTC). The compound consists of three buildings. The large concrete and steel main building houses the administrative offices, programs, education, food service, laundry, gymnasium, one 14-cell transit/pre-hearing detention unit, and two 125 double-occupancy cell offender housing units. The other two buildings are the armory and the training building. All cells have sinks and commodes.. The showers, located in the housing units, have privacy screens and the detention cells have attached recreation spaces.

The control center monitors all traffic entering and exiting the facilities. Cameras are placed in many areas. The facility has two entry points, the front staff/visitor and the rear vehicle entry gate. The correctional officers provide security supervision.

A Control Center monitors all traffic entering and exiting the facility. Cameras are placed in the kitchen, outside entrance, visitation and lower level dorm. The facility has two entry points, the front staff/visitor entrance and the rear wire gate for vehicles. The perimeter security consists of a single fence with razor wire.

The grounds are well manicured with plants and flowers, the facility was clean.

**Facility Programs:**

The facility has a variety of rehabilitation programs that are offered to the inmate population. These include; Academic, Vocational, Life Skills, Career and Technical Programs, and Religious Programs.

- General Education Development
- Pre-GED
- Adult Basic Education



- Alcohol & Drug
- Life Skills
- Pre-Release/Life Skills
- Peer Education
- Father Initiatives Class
- Bible Study
- Computer Training
- Behavior Enhancement Program
- Specialized Individual Counseling
- Faith Based Dorm
- Financial Management

Inmates incarcerated at the BCC are afforded the opportunity to participate in work programs in most of the operational areas of the facility.

**Facility Demographics:**

Designed Capacity	520
Actual Number of Resident Housed on the first Day	504
Number of Youthful Inmates Housed	0
Custody/Security Level in the facility	Minimums (G2)
Gender	Adult Male

## Summary of Audit Findings

*The summary should include the number of standards exceeded, number of standards met, and number of standards not met, **along with a list of each of the standards in each category.** If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.*

**Auditor Note:** No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

**Number of Standards Exceeded:** 0

**Number of Standards Met:** 45

**Number of Standards Not Met:** 0

### Summary of Corrective Action (if any)

The Auditor conducted an exit conference with the agency and facility officials. 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 warden and PREA compliance Manager began corrective action on each provision immediately.

On Thursday, April 19, 2018, the exit conference was held and attended by:

- MTC Director of Corrections/Agency PREA Coordinator (Phone)
- MTC Director of Policy & Audits/Agency Assistant PREA Coordinator (Phone)

- Warden
- Executive Secretary
- Quality Assurance
- TDCJ Compliance Specialist
- MTC Regional Warden
- TDCJ Contract Monitor
- Administrative Lieutenant
- Administrative Sergeant
- Major

The following is a summarized description of the auditor’s discussions, corrective actions, recommendations made, actions taken by the facility, relevant timelines, and methods used by the auditors to reassess compliance.

1. **Auditor Discussion:** The facility shall implement practice of having intermediate and higher level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such practice shall be implemented for night shifts as well as day shifts. Documentation and staff interviews reveal that the facility is conducting the required PREA Unannounced rounds and placing the date and time in the Unit logbooks, and Placing the location of the PREA rounds on the bottom of the Shift document; however, the documentation needs to have details of the rounds. Standard 115.13 Supervision and Monitoring
  - a. The facility Warden issue a directive to all intermediate and higher level supervisors responsible for conducting PREA unannounced rounds to add more details in the Unit logbooks of the rounds. Such as – Spoke with inmates and inmate has no PREA issues. All inmates are account for and in their cells. Spoke with staff all everything was ok. Check phones and they are working.
  
2. **Auditor Discussion:** The facility shall require all staff to report immediately and according to policy any knowledge, suspicion, or information regarding and incident of sexual abuse or sexual harassment that occurred in a facility. Conducting staff interviews it was reveal that a staff has concerns regarding reporting knowledge or suspicion of PREA related issues. It was express that the staff supervisor does not report the information as required by policy. The auditor informed the reporting staff that this information will be shared with the Warden, will he be willing to discuss this information with the Warden, and the staff said yes. Standard 115.61 Staff and Agency Report Duties.
  - a. The concern was discus with the Facility Warden. The submitted the following summary to the auditor. An investigation was previously completed on the complaint that a lieutenant was not reporting PREA and other issues. A statement was requested from the officer by a superior during the time of reporting of the issues. An investigation was conducted. The complaint was investigated with the offender, lieutenant and the correctional office by the Captain. The investigation resulted in that the offender was manipulating and trying to prep the officer to bring in contraband while trying to get another officer in trouble due to an officer writing the offender a case.

3. **Auditor Discussion:** During the inmate interviews, 6 out of 30 inmates reveal that they try calling the numbers painted on the Unit wall, they received a message stating this is a restricted number to the Ombudsman Office.
  - a. After a discussion with the TDCJ staffs (Compliance Specialist and the Contract Manager), it was establish that the phone lines are manage by TDCJ. TDCJ staff explains that the Ombudsman information painted on the unit walls are for third parting reporting. TDCJ explain that the inmate can call a family member from approved phone list and give that family member the Ombudsman number listed on the Unit wall, the family member can make a third party report.

It was determined that the inmate needs clarification on the TDCJ process regarding inmates making third party reporting, because inmates are calling that ombudsman number to report and not for third party reporting.

To clarify the TDCJ Ombudsman Office number on the Unit wall, the Facility Warden directed the staff to paint the words “Third Party Reporting” on top of the Ombudsman Office number. Informed the inmates on the TDCJ third party reporting process; the staff started this process on April 17, 2018.

The standards are rated as exceeded, met, or not met. Most standards have between 1 – 20 provisions. To achieve compliance with 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 on May 17, 2012. Forty-five (45) Prisons and Jail Standards were audited.

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

Deficiencies and corrective actions regarding concerns and findings may appear in the standard-by-standard discussions in the main body of the report. A concern that has been corrected by the facility within the 45 day period and can show practice will be viewed as compliant.

## PREVENTION PLANNING

### Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

**All Yes/No Questions Must Be Answered by The Auditor to Complete the Report**

#### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  
 Yes  No

### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)  Yes  No  NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # ED-03.03 Safe Prisons/PREA Program
- TDCJ Safe Prisons/PREA Plan
- TDCJ # PO-07.150 Unit Safe Prisons/PREA Manager
- TDCJ - Solicitation, Offer and Award of Contract
- TDCJ - Section C Description/Specifications/Work Statement
- TDCJ – Section C-3 Department Policies and Procedures, and Compliance with Applicable Rules, Regulations,
- TDCJ – Section C-9 Prison Rape Elimination Act (PREA) Contract Monitor
- PREA Accountability Statement

- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- MTC Organizational Chart
- Bridgeport Correctional Center Organizational Chart
- PREA Accountability Statement
- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Interviews
  - o MTC Director of Corrections/Agency PREA Coordinator (Phone)
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Deputy Warden of Programs/Facility PREA Compliance Manager

Management & Training Corporation (MTC) published the agency policy serial # 903E.02, Ensuring Safe Prisons. The policy mandates a zero tolerance toward all forms of sexual abuse and sexual harassment. The policy outlined the company’s approach to prevent, detect, and response to sexual abuse and sexual harassment. The agency policy defines general definitions and definitions of prohibited behaviors to include sexual abuse and sexual harassments.

MTC policy designates an upper-level PREA Coordinator for the agency that has sufficient time and authority to develop, implement and oversee MTC efforts to comply with the PREA Standards in all its facilities. 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 Agency Assistant PREA Coordinator. MTC’s Policy and Audit Director, is designated as the Assistant PREA Coordinator. These individuals are higher level staff who has 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.

The agency operates more than one facility, and each 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.

**Interview Results:**

- The previous interview via phone with MTC Director of Corrections/Corporate confirmed appointed as MTC PREA Coordinator and Director of Policy and Audits are the Agency Assistant PREA Coordinator.
- The Warden confirmed the appointed of the Major as the Facility PREA Compliance Manager.
- Interview with the Facility PREA Compliance Manager indicated that he has a great deal of correctional experience and sufficient time and authority to coordinate the facility’s effort to comply with the PREA Standards.

## Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

### 115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ - Solicitation, Offer and Award of Contract
- TDCJ - Section C Description/Specifications/Work Statement
- TDCJ – Section C-3 Department Policies and Procedures, and Compliance with Applicable Rules, Regulations,
- TDCJ – Section C-9 Prison Rape Elimination Act (PREA) Contract Monitor
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Corrections/Agency PREA Coordinator (Phone)
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator

- Warden
- Facility PREA Compliance Manager
- Contract Monitor

MTC has delegated authority with direct responsibility for the operation of facilities that confine inmates and detainees. Bridgeport Correctional Center does not have authority to contract with other entities for the confinement of inmates.

TDCJ has designated a Contract Monitor to monitor the Bridgeport Correctional Center to ensure the Contractor is compliant with the PREA Standards for Adult Prisons and Jails.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

In the past 12 months, the number of Bridgeport Correctional Center contracts for the confinement of inmates that the facility entered into or renewed with private entities or other government agencies since the last PREA

## Standard 115.13: Supervision and monitoring

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No  NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

#### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  
 Yes  No  NA

#### 115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?  Yes  No

#### 115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  Yes  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No



- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews, and Observations

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Memo: Annual Staff and Video Monitoring Assessments
- Budget Justification Forms and Staffing Plans
- Statement of Facts – Annual Review
- Bridgeport Correctional Center 1<sup>st</sup> Shift Roster
- Bridgeport Correctional Center 2<sup>nd</sup> Shift Roster
- Bridgeport Correctional Center 3<sup>rd</sup> Shift Roster
- TDCJ # ED-03.03 Safe Prisons/PREA Program
- TDCJ Safe Prisons/PREA Plan
- TDCJ # PO-07.150 Unit Safe Prisons/PREA Manager
- TDCJ Post Order Captain of Correctional Officers
- TDCJ Post Order Lieutenant of Correctional Officers
- Deviations from Staffing Plan
- Shift Briefing Topics
- Shift Supervisor Daily Staffing Notations
- TDCJ # AD-11.52 Security Staffing
- TDCJ Operation and Management Services Staffing Plan
- TDCJ Security Manual: Post Orders and Security Memorandums
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Staff Conducting Unannounced Rounds
  - o Contract Monitor

Bridgeport CC 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 Facility PREA Compliance Manager indicated that the facility takes into consideration the 11 requirements in standard 115.13 (a) – 1:

An interview with the Facility PREA Compliance Manager revealed each time the staffing plan was not complied with; however, the facility documents and justifies all deviations from the staffing plan. Cameras are strategically located to supplement staffing and to enhance supervision of inmates. The Auditor is not going to provide further information related to the cameras 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.

MTC Directive and 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 PREA Compliance Manager's interview confirmed the process for conducting annual reviews. There were no deviations from the staffing plan, and there is no need for adjustments to the staffing plan; however, there is a staff shortage.

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 503.

Interviews with the Facility Management Team and documentation reviewed revealed that the intermediate level and higher level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Bridgeport CC requires unannounced rounds to be performed on all shifts and all areas of the facility occupied by inmates.

When announced rounds are being conducted, Bridgeport CC Directive directs staff not to alert other staff. According to policy "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." The facility is an older facility and does have some areas that need to be checked during unannounced PREA rounds to determine clandestine sexual activity. Cameras are monitored in the control room and may also be viewed in the Warden's office.

The facility provided documentation to confirm unannounced rounds are being conducted. Unannounced rounds are documented on a log sheet. The documentation reviewed from the log sheets only states the date, time in, time out, location, printed name, and signature.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- Since the last PREA audit, the average daily number of inmates reported was 513.
- Since the last PREA audit, the average daily number of inmates on which the staffing plan was predicated reported was 520.

## Interview Results

- Interview with the Facility PREA Compliance Manager indicated that he is consulted regarding any assessment of or adjustments to, the staffing plan.
- Interviews with a facility high-level staff that conduct and document unannounced rounds indicated that they do conduct and document unannounced rounds. Submitted documentation supported staff comments. Interviewed staff also indicated that policy prohibits staff from alerting other staff and they monitor the radio communication.
- Interview with the Warden indicated that the facility has a staffing plan shift rosters. When assessing adequate staffing levels and the need for video monitoring they consider all of the components listed in the standard.

## Standard 115.14: Youthful inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- MTC Juvenile Inmates at Bridgeport CC – Total Inmates 0
- Statement of Fact: Youthful Inmates
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
  
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Deputy Warden of Programs/Facility PREA Compliance Manager
  - o Staff Conducting Unannounced Rounds
  - o Management Staff

The Bridgeport Correctional Center (BCC) does not house youthful offenders. However, if there is a youthful offender moved to BCC, the Texas Department of Criminal Justice (TDCJ) will be notified immediately. The youthful offender will then be separated out of sight and sound from all adult offenders until immediately transferred out of the facility.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the numbers of housing units to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters reported was zero.
- In the past 12 months, the number of youthful inmates placed in the same housing unit as adults at this facility reported was zero.

### Interview Results

- Interviews with the Facility Management team and, a review of facility demographics/documentation reveal that Bridgeport CC does not admit youthful inmates.

- 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 following interviews were not conducted because the facility does not house youthful inmates: Education and Program staff who work with youthful inmates, and Line staff who supervise youthful inmates.

## Standard 115.15: Limits to cross-gender viewing and searches

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?  
 Yes  No

#### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA

#### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates?  
 Yes  No

#### 115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  Yes  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

### 115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  Yes  No
- If an inmate's genital status is unknown, does the facility determine genital status 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?  Yes  No

### 115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- MTC In-Service Class INSN 180X Completion Roster
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Bridgeport CC: Memo Cross Gender Searches of Female Offenders
- Bridgeport CC: Memo Transgender Searching
- Bridgeport CC: Training Roster
- Bridgeport CC: Security Patrol Log/Fire Watch Log
- Statement of Fact: No Female Offenders
- Opposite Gender Must Announce Presence Sign
- TDCJ # AD-03.22 Offender Searches
- TDCJ # PO-07.023 Cell Block Officer

- TDCJ # PO-07.027 Dorm Officer
- TDCJ # PO – 07.009 Cell Block Picket Officers
- TDCJ #CID Management Operations – FY 2017 Pre-Service Training Curriculum
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Staff
  - o Non-Medical Staff on Cross Gender Searches
  - o Random Inmates
  - o Management Staff

MTC 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 Bridgeport CC reports no exigent circumstances for this audit period. The facility will maintain documentation when exigent circumstances occur. 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 had been authorized to conduct the above searches within the PREA audit period. The facility provided documentation that Bridgeport CC is for the management and operations of adult male offenders and female offenders are not housed in this facility. Interviews with inmates confirmed that none of them had been strip-searched by a female officer.

Bridgeport CC rated capacity is 520, which exceed the 50 inmate rule. This provision does not apply.

MTC requires Bridgeport CC to implement policies and procedures that enable inmates to shower and perform bodily functions and change clothing without a non-medical staff of the opposite gender viewing the breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to a routine cell or bed checks.

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 doorway 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 staff.

During the on-sit audit visit the facility housed transgender and intersex inmates. MTC 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 determines 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.

Documentation review revealed that staff receives training 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 way 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 had been no cross-gender strips or visual body cavity searches conducted within the audited cycle.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates reported was zero.
- In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff reported was zero.
- The number of pat-down searches of female inmates that were conducted by male staff reported was zero.
- The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstances reported was zero.

**Interview Results:**

- Ten (10) out of ten (10) staff interviewed, and facility documentation indicated that all cross-gender strip searches and cross-gender visual body cavity searches would be documented. The facility only houses male inmates. Female officers do not conduct cross-gender strip searches and cross-gender visual body cavity searches.
- Ten (10) out of seventeen (17) interviewed staff indicated that the other officers announce their presence when entering a housing unit that houses inmates of the opposite gender.
- Two (2) out of ten (10) staff interviewed indicated that they had not received training of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.
- Twenty-four (24) out of thirty (30) inmates interviewed stated that female staffs announce their presence when entering the housing unit.
- Twenty-seven (27) out of Thirty (30) inmates interviewed from all housing units stated that they and other inmates are never naked in full view of staff, when using the toilet, showering, or changing clothing.

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

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.16 (a)**

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect,



and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?  Yes  No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)?  Yes  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision?  Yes  No

#### 115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  Yes  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

## 115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance 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 under §115.64, or the investigation of the inmate's allegations?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Personal Interpreter Self Service Website
- Memo: Certified Interpreters for Offenders who are Non-English Speaking and/or have Disabilities
- Memo: Staff Member serves as Spanish Interpreters
- TDCJ # AD-.04.25 Language Assistance Services to Offenders Identified as Monolingual Spanish-Speaking
- TDCJ – Certificate Presented to Qualified Spanish Interpreter (34)
- Bridgeport CC: Inmate Receipt of Information (Spanish and English)
- Bridgeport CC: Inmate Unit Orientation List
- Bridgeport CC: Offender Orientation Handbook (English)
- Bridgeport CC: Offender Orientation Handbook (Spanish)
- TDCJ Offender Orientation Handbook (English)
- TDCJ Offender Orientation Handbook (Spanish)
- TDCJ "Texas Legislature Zero-Tolerance (English and Spanish)
- Bridgeport CC: PREA Posters (Spanish and English)
- Bridgeport CC: Designation of Bridgeport Correctional Center ADA Coordinator
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers
  - o Random Inmates

- Inmates with Disabilities
- Management Staff

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. Also, 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. The facility will use Education Staff to assist with PREA education with inmate's disabilities.

MTC requires that any inmate who appears to have a condition that would limit the inmate's access to and participation in, any program or service offered by the facility, shall be handled as follows:

1. Inmates who are deaf, blind, or have other physical disabilities that significantly limit access to programs and services in the facility, may be transferred to an appropriate facility within 72 hours of admittance for assessment and classification consistent with safety and security.
2. During assessment and classification, the inmate shall be provided with CN 101901, Americans with Disabilities Act – Notice of Rights and CN 101902, Request for Reasonable Accommodations by health services staff or a qualified sign language interpreter for the deaf or hard of hearing inmates who know sign language.

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 by security staff. Outside interpreting services are available to the inmate population as dictated by policy.

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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used, and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under 115.64, or the investigation of the resident's allegations reported was zero.

#### **Interview Results:**

- 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 that they could contact the staff who speaks Spanish if the need arises.
- Three (3) inmates that were disabled and limited English proficient were interviewed, one inmate only speaks Spanish. A facility staff member was interpreting for the auditor.

## Standard 115.17: Hiring and promotion decisions

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who 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?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who 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?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?  Yes  No

#### 115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check?  Yes  No
- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?  Yes  No

#### 115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  Yes  No

#### 115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  Yes  No

#### 115.17 (f)

- Does the agency ask 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?  Yes  No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  Yes  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

#### 115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- MTC Policy 201.3 – Background Checks
- MTC Search Internal Site
- MTC Post-Employment PREA Questions
- MTC Job Position Description
- MTC Human Resource Employee Applicants
- MTC Interview Questions – Correctional Officer
- TDCJ Employment Section – Clearance Area
- TDCJ Pre-Employment NCIC/TCIC Request
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email C
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Human Resource Staff
  - o Management Staff

MTC requires the facility not to 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; to include persons who are mentally ill or disabled or retarded or chronically ill or handicapped, or institution providing skilled nursing or intermediate or long-term care or custodial or residential care.
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 subsection 2.

Policy requires that before hiring new employees who may have contact with inmates, the Department of Corrections will perform a criminal background check; and consistent with Federal, State and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of inmates or detainee sexual abuse or harassment or any resignation pending an investigation of such allegations.

Bridgeport CC completes a criminal background records check before enlisting the services of contractors who may have contact with inmates. Bridgeport CC conducts pre-employment integrity interviews, asking the PREA questions as a separate set of interview questions.

MTC requires Bridgeport CC to conduct criminal background records checks every five years of current employees and contractors who have contact with inmates according to staff interviews.

Bridgeport CC 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 any interviews or written self-evaluations conducted as part of reviews of current employees. Bridgeport CC also imposes upon employees a continuing affirmative duty to disclose any misconduct related to PREA.

MTC policy prohibits staff from material omissions and the provision of materially false information.

MTC Offender Data System (ODS) Generated Automated Email: Email C – from ODS notifying the facility HR Manager that a determination has been made on a PREA investigation and the specific action which is required.

- a. Follow standards and policy related to disciplinary sanctions for staff as detailed below (115.76).
- b. Follow standards and policy related to hiring and promotion decisions as detailed below (115.17).
- c. Inform the inmate and document the notification, consistent with standards 115.73, unless the allegation, following an investigation, was unfounded. (This can be performed by the PREA Manager depending on facility direction).

**Interview Results:**

- A review of the staff files and interview with the HR staff confirms that background clearances are placed in the employee files.
- Interview with Facility Human Resource Staff confirmed a hiring process that is comprehensive and thorough. The facility performs criminal record background checks on all newly hired employees and contractor during the clearance process.
- Interview with a staff member for the MTC indicated that TDCJ performs criminal record background checks on all newly hired employees and contractor during the clearance process. This is done regardless of whether they may have contact with offenders. The employee's information is entered into the Criminal Justice Information System (CJIS), and a response is sent back by the Texas Department of Public Safety (DPS). The DPS also immediately provides an automatic notification to the agency through e-mail if any criminal charges are brought against any employee or contractor during their employment. Additionally, the agency performs warrant searches during the employee's birth month

and six months after their birth month. The disciplinary record all employees considered for promotion is reviewed at the time of consideration.

- Interview with Facility Human Resource Staff indicated that when a former employee applies for work at another facility, upon request from that facility that they would provide requested information as long as it does not violate policies or laws.

## Standard 115.18: Upgrades to facilities and technologies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes  No  NA

#### 115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*



**Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Statement of Fact: Video Monitoring System
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- TDCJ # SM 01.14 Operating and Monitoring Video Surveillance Systems
- Video Surveillance Entrance Searches Review Log
- Bridgeport CC: Memo Upgrade of Facility and Technologies (Interior Roofing Structure Failed – 2014)
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Management Staff

The facility Management Team indicates 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.

The facility Management Team indicated 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.

**Interview Results:**

- Interviews with the Warden indicated that a secondary Video Monitoring System was installed at the Bridgeport Correctional Center September 15, 2016. It along with the existing video surveillance system is both operational and recording to the DVR systems.
- Interviews with the PREA Compliance Manager and Warden indicated that was no major expansion during the past three years. If there was a major expansion, that he and the Facility PREA Compliance Manager would be involved in any planning?

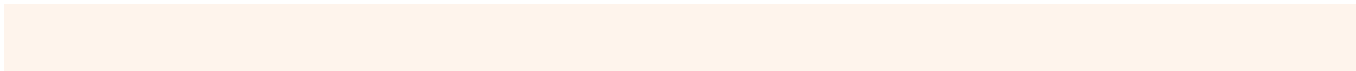
**RESPONSIVE PLANNING**

**Standard 115.21: Evidence protocol and forensic medical examinations**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.21 (a)**

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  
 Yes    No    NA



### 115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes  No  NA
- Is this protocol, as appropriate, 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? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes  No  NA

### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?  Yes  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  Yes  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?  Yes  No
- Has the agency documented its efforts to secure services from rape crisis centers?  Yes  No

### 115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?  Yes  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

### 115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  Yes  No  NA

### 115.21 (g)

- Auditor is not required to audit this provision.

### 115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.]  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # AD-16.04 Administrative Directive – Forensic Evidence Collection
- TDCJ # AD-16.20 Administrative Directive – Reporting Incidents/Crimes to the Office of The Inspector General
- TDCJ # AD- 16.20 Attachments A: Immediate Reporting Guidelines
- TDCJ # G-57.1 Correctional Managed Health Care Policy Manual – Sexual Assault/Sexual Abuse
- TDCJ # 02.02 Safe Prisons/PREA Operations Manual – Offender Victim Representative
- Bridgeport CC Email: Requesting Mutual Agreement for Assistance 2017 Family Crisis Center
- Bridgeport CC: Unsigned MOU – Family Crisis Center
- Statement of Fact: Contacting the Wise Hope Shelter and Crisis Center
- Memorandum of Understanding: Wise Hope Shelter and Crisis Center
- Sexual Assault Services Providers Crisis Center

- Bridgeport CC Memo: Offender Victim Representative (OVR)
- Bridgeport CC Chaplain I Training: Victim Representative Training Certificate
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers
  - o Inmates Reported Sexual Abuse
  - o Management Staff

The PREA Investigation Unit or designee serves as the primary investigating authority for all incidents of sexual harassment.

The facility utilizes the internal and external offices to conduct investigations regarding all felony related crimes to include alleged sexual violence that occurred at the facility. Both the facility and the external office follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

The preponderance of Evidence is defined as proof by evidence that, compared with evidence opposing it, leads to the conclusions that the fact at issue is more probably true than not. Policy also states that as a result of the preponderance of the evidence, the investigator may determine whether the allegation is substantiated.

Interviews with the investigator and a PREA Unit Investigator confirmed the standard to determine whether an allegation is substantiated is the preponderance of the evidence.

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. Victims of sexual assault

The facility makes available to the victim a victim advocate. If not available to provide victim advocate services, the facility makes available (to provide services) a qualified staff member from a community-based organization or a qualified facility staff member. The facility provided documentation that showed efforts to secure services from The Family Crisis Center of East Texas.

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 as needed.

The facility 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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of forensic medical exams conducted during the past 12 months reported was zero.
- The number of exams performed by SANES/SAFE during the past 12 months reported was zero.

- The number of exams performed by a qualified medical practitioner during the past 12 months reported was zero.

**Interview Results:**

- Documentation submitted by the facility and confirmed by the Facility PREA Compliance Manager, that the facility has contacted the Wise Hope Shelter and Crisis Center for the needed support. The Wise Hope Shelter and Crisis Center has agreed to provide assistance to the Bridgeport Correctional Center as needed.
- Interview with the PREA Compliance Manager and documentation indicated that there have been no requested or need for a victim representative to be used at the Bridgeport Correctional Center as of February 8, 2018.
- Interview and documentation indicated that there are no SAFE or SANE available in the community, therefore the Bridgeport Correctional Center sends all sexual abuse victims to the local hospital 12.5 miles away in Decatur for an examination by a licensed physician immediately if needed.
- Interviewed staff, including the facility investigator, was familiar with the evidence protocol and roles they would play as first responders. Medical staff related their role in the sexual assault would be to provide any first aid that might be needed because of injuring immediate medical attention. The staff stated they would “make sure the inmate victim was stable,” preserve the evidence.
- Interview with the 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 the standard provision (g) 1 and 2. The policy requires the Warden to request that outside investigative authorities conduct the investigation per PREA investigation standards.
- For victims of sexual assault, interviewed staff indicated that the facility would offer all victims access to forensic medical examinations without financial cost. Staff indicated that SANE/SAFE are provided by the local hospital.
- Ten (10) out of ten (10) interviewed staff indicated that the responsibility for conducting sexual abuse investigations is the Facility PREA Compliance Manager.

**Standard 115.22: Policies to ensure referrals of allegations for investigations**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.22 (a)**

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

### 115.22 (b)

- Does the agency have a policy and practice in place 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, unless the allegation does not involve potentially criminal behavior?  Yes  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).]  Yes  No  NA

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport Correctional Center Information Report
- Bridgeport Correctional center MEMO: Employee Misconduct (Offender Relationship)
- Bridgeport CC: Shift Rosters
- TDCJ Administrative Incident Review
- TDCJ PREA Ombudsman – Texas Board of Criminal Justice

- TDCJ Emergency Action Center System Incident Report
- TDCJ Interoffice Communication (Office of Inspector General)
- TDCJ Classification Profile Sheet
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ #05.01 Attachments G – Sexual Abuse Investigation Checklist
- TDCJ # AD-16.20 – Reporting Incidents/Crimes to the Office of The Inspector General
- TDCJ Attachment AD-16.20 Immediate Reporting Immediate Reporting
- TDCJ Attachment B - AD-16.20 Reporting Guide For Conduct Prohibited by PD-22
- TDCJ Staff-on-Offender Sexual Abuse Investigative Worksheet
- TDCJ Offender Statement
- TDCJ Summary of Facts and Findings
- TDCJ Warden’s Investigative Review / Recommended Actions
- TDCJ Offender Notifications of Outcome
- TDCJ Offender Notification Brochure
- TDCJ Offender Protection Witness Statement/Report of Interview
- TDCJ Emergency Action Center System: Incident Report
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Facility Investigator
  - o Random Officers
  - o Management Staff

According to interviews with the Warden, Facility PREA Compliance Manager, 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 the facility. The facility uses a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Per MTC and TDJC policy requires OIG to be notified immediately and assume control of the investigation when appropriate.

Investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attach 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 had 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.

The Bridgeport CC 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. Investigations staff imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

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.

Department of Criminal Justice components responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails has in place a policy governing investigations.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of allegations of sexual abuse and sexual harassment receives during the past 12 months was 2.
- The number of allegations resulting in an administrative investigation during the past 12 months was 1.
- The number of allegations referred for criminal investigation during the past months was zero.

**Interview Results:**

- An additional interview with staff 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.

<h2>TRAINING AND EDUCATION</h2>
---------------------------------

**Standard 115.31: Employee training**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.31 (a)**

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  Yes  No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Yes  No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No



- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  Yes  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  Yes  No

#### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  Yes  No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?  Yes  No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  Yes  No

#### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employee understand the training they have received?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # AD-12.20 – Implementation and Operation of the TDCJ In-Services Training Program for Uniformed and Non-Uniformed Employees
- TDCJ FY 2018 – Pre Service Training Block 1 (CTSD Curriculum)
- Bridgeport CC Training Rosters
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers
  - o Management Staff

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 orientation training, in-service and other additional training and include all requirements.

Training is tailored to the gender of the inmates at the employee's facility. Review of documentation revealed that staff receives 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.

All current employees have received training, and the facility has provided each employee with refresher training annually to ensure that all employees know the facility's current sexual abuse and sexual harassment policies and procedures. The directive requires additional training for investigators, health practitioners, and mental health staff to receive additional training specific to their areas of responsibility.

The facility documents, through employee signature and electronic verification, staff understanding of the training they have received. The Bridgeport CC documents staff training using the Training Acknowledgement form and a training roster, which requires the staff and instructor signature, date and job title.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of staff employed by the facility, which may have contact with inmates, who were trained on the PREA requirements reported, was 175.

### Interview Results:

- Ten (10) out of ten (10) interviewed staff consistently related they receive PREA Training in a variety of ways. These include PREA Training as part of the training provided for newly hired correctional officers.

- Staff indicated refresher training is given during shift briefings.

## Standard 115.32: Volunteer and contractor training

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?  Yes  No

#### 115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?  Yes  No

#### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

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### Supporting Documents, Interviews, and Observations

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ Letter: Criminal Justice Volunteer
- TDCJ Acknowledgement of Volunteer Training/Orientation
- TDCJ Volunteer Services Plan
- TDCJ Volunteer Training Facilitators Guide
- MTC Staff Training Statement

- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Facility PREA Compliance Manager
  - o Volunteer
  - o Contractor

The Bridgeport CC 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.

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.

The facility maintains documentation confirming that volunteers and contractors understand the training they received. The Bridgeport CC documents volunteer and contractor training using the Training Acknowledgement form and rosters, which requires the volunteers, contractors and instructor signature and date.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of volunteers and individual contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and a response was 142.

**Interview Results:**

- An interview with volunteers confirmed they had received PREA training, understood the zero-tolerance policy and how to report allegations or reports of sexual abuse or sexual harassment. An interview with the Volunteer Coordinator indicated all volunteers receive PREA orientation.
- Staff related they are given information on detection, reporting, and following-up and are allowed to ask questions during their PREA training.

**Standard 115.33: Inmate education**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.33 (a)**

- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

### 115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  Yes  No

### 115.33 (c)

- Have all inmates received such education?  Yes  No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  
 Yes  No

### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  Yes  No

### 115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?  
 Yes  No

### 115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # 02.03 – Safe Prisons/PREA Program Postings and Brochures
- TDCJ # 06.02 – Offender Sexual Abuse Awareness Training
- TDCJ Safe Prisons/PREA Plan
- Bridgeport CC Inmate Handbook English
- Bridgeport CC Inmate Handbook Spanish
- TDCJ Offender Orientation Handbook (Spanish and English)
- Texas Legislature Adopted a Zero-Tolerance (Spanish and English)
- PREA Related Posters
- MTC Offender Orientation Handbook
- Bridgeport CC Offender Sexual Abuse Awareness Education Sign-In Roster
- TDCJ Spanish Speaking Inmates (34)
- Inmate Receipt of PREA Information
- Inmate Orientation Signature List
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Facility PREA Compliance Manager
  - o Random Inmates
  - o Intake Staff

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:

- o Definition of Sexual Violence
- o Specifics about the Prison Rape Elimination Act
- o Rights as a Victim
- o Prevention/Intervention
- o Self-Protection
- o 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 incident s 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. Inmate’s acknowledgment statements were provided for receiving PREA information.

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.

All inmates at the Bridgeport CC received and had been educated on PREA. Inmates that transfer to the facility also receive the required PREA Education.

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 video is used during orientation as well as in the dorm setting.

The facility maintains documentation of inmate participation in the education sessions by using the Inmate Orientation checklist. The checklist requires the inmate to sign and date and is witnessed by staff signature.

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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- The number of inmates admitted during past 12 months who were given this information at intake reported was 745.
- The number of inmates in the facility on the date of audit who did not receive comprehensive education within 30 days of intake as required in 115.33 (b) was 745.

**Interview Results:**

- Interviews with staff who conduct intake indicated that at intake the inmate is given a handbook, sees a PREA Video and signs statements confirming receiving the PREA information and that he understands it. This information includes zero tolerance and how to report incidents or suspicions of sexual abuse or sexual harassment as well as their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting these incidents.
- Interviewed intake staff indicated that during orientation all inmates current or transferred from other facilities are educated on the zero tolerance and how to report incidents or suspicion of sexual abuse or

sexual harassment. In general, this information is given during the intake process; however, it is always given within the 30 days.

- One (1) out of thirty (30) inmates interviewed stated when they first came to the facility they did receive information regarding facility rules against sexual abuse and harassment.
- Thirty inmates were interviewed using the following statement when you came to the facility, were you told about:
  - You're right to not be sexually abused or sexually harassed, two (2) out of thirty (30) answer yes.
  - How to report sexual abuse or sexual harassment, twenty-nine (29) out of thirty answer yes, they were told.
  - Your right not to be punished for reporting sexual abuse or sexual harassment, twenty-eight (28) out of thirty (30) answer yes, they were told.

## Standard 115.34: Specialized training: Investigations

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

#### 115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA



### 115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  
 Yes    No    NA

### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ Office of the Inspector General 2015 – Offender Sexual Assault Investigations
- NIC PREA Training Test Results
- Office of the Inspector General Training: Sexual Assault Investigative Topics
- Office of the Inspector General Training: Interview and Interrogation
- TDCJ # AD-16.03 – Evidence Handling
- TDCJ # AD-16.20 Reporting Incidents/Crimes to the Office of the Inspector General
- TDCJ # BP-01.07 – Inspector General Policy Statement
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ Safe Prisons/PREA Plan
- Bridgeport CC Memo: Specialized Training Investigations
- NIC Certificate of Completion: PREA Investigating Sexual Abuse in a Confinement Setting
- TDCJ Sexual Abuse Investigation Checklist
- TDCJ Staff-On-Offender Sexual Abuse Investigative Worksheet
- TDCJ Offender Statement
- Bridgeport CC Shift Rosters
- TDCJ Emergency Action Center System – Incident Report
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:

- Facility PREA Compliance Manager
- Facility Investigator

In addition to the general PREA training provided to all employees, the Bridgeport CC ensures that its Facility investigators have received training in conducting investigations in confinement settings. Interviews and documentation reveal that specialized training was completed.

The OIG investigators completed the NIC Specialized training. 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.

The facility maintains a list of investigators having completed the required specialized training in conducting sexual abuse investigations.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of investigators currently employed who have completed the required training was 4.

**Interview Results:**

- Interviews with the Facility Investigators indicated that all investigators received NIC online training specific to conducting sexual abuse investigations in confinement settings.
- Interviews with the Facility Investigators indicated that policy requires that all allegations of sexual abuse or sexual harassment be referred for investigation with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.

**Standard 115.35: Specialized training: Medical and mental health care**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.35 (a)**

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?  Yes  No

### 115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility does not conduct forensic exams.)  Yes  No  NA

### 115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?  Yes  No

### 115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?  Yes  No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ Letter: Private Facility Contract Monitoring Oversight (Inter-Office Communication)
- Correctional Managed Care – The University of Texas Medical Branch / Transcript Annual Nursing Services Training
- Correctional Clinical Association Medical Staff Training Records
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Facility PREA Compliance Manager
  - o Medical Staff
  - o Mental Health Staff

Interview with the Bridgeport CC medical/mental health staff indicated that all full- and part-time medical and mental health care practitioners who work regularly in the facilities had 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.

The medical staff at Bridgeport CC does not conduct forensic examinations. The local hospital conducts all emergency care or treatment to include “Sexual Assault Forensic Examinations.” The local hospital examiners are qualified SAFE and SANE practitioners that comply with the National Protocol for Sexual Assault Medical Forensic Examinations.

The facility maintains documentation that medical/mental health practitioners have received the training referenced in this standard. Training rosters and staff meetings sign-in sheets were submitted to the auditor.

**Interview Results:**

- Interviewed healthcare staff confirmed the specialized training received by medical.
- Interviewed healthcare staff confirmed that the facility does not conduct forensic examinations.

<b>SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS</b>
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**Standard 115.41: Screening for risk of victimization and abusiveness**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.41 (a)**

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No

**115.41 (b)**

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

#### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

#### 115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  Yes  No

#### 115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  Yes  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?  Yes  No

#### 115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?  Yes  No

#### 115.41 (i)

- Has the agency implemented 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?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons PREA Operations Manual (9/2016)
- Screening for Risk of Victimization and Abusiveness
  - At Risk of Victimization
  - At Risk of Abusiveness
  - Review within 30 days
- TDCJ Offender Assessment Screenings
- File Review
- History of Sexual Abuse
- Interview Follow-Up Questions
- If the Inmate Needs a Interpreter (Signature of Interpreter is Required)
- Interviewer Comments
- Committee Review
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email B
- PREA Offender Reassessment Screening
- TDCJ # 03.01 Offender Assessment Screening
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - MTC Director of Corrections/Agency PREA Coordinator (Phone)
  - MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - Warden
  - Facility PREA Compliance Manager
  - Staff Screening for Risk of Victimization and Abusiveness
  - Random Inmates

The facility assesses all inmates during intake screening to include inmates that transfer from other prisons for risk of being sexually abused.

Interviews and documentation revealed that intake screenings are taking place within 72 hours of arrival at the Bridgeport CC. Also, during intake screening, procedures require 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.

The facility uses the TDCJ Intake Screening form and the Screening for Risk of Victimization and Abusiveness as the objective screening instruments.

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 for conducting Screening for Risk of Victimization and Abusiveness indicated that the facility uses the TDCJ 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 Intake Screening Form whether the inmate is vulnerable or sexually aggressive.

Interviews and documentation reviewed indicated that the PREA Compliance Manager 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.

Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to any questions as stated in section (d).

The agency implements appropriate controls on the dissemination within the facility of responses to questions asked under this standard to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates as described above.

MTC Offender Data System (ODS) Generated Automated Email: Email B – from ODS notifying the facility PREA Manager that a determination has been made on a PREA investigation and the specific action which is required:

- a. Reassess the inmate's risk of victimization or abusiveness based upon information from the investigation. 114.41.



- b. For substantiated or unsubstantiated sexual abuse allegations, initiate a Sexual Abuse incident Review within 30 days of determination. 115.86
- c. Inform the inmate and document the notification, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. 115.73

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexually victimization or risk of sexually abusing other inmates with 72 hours of their entry into the facility was 745.

**Interview Results:**

- Interview staff indicated that the facility’s PREA Compliance Manager, Intake, and Counseling have access to inmates risk assessment to protect sensitive information from exploitation.
- Interview staff indicated that the initial risk screening assessment considers all the requirements listed in this standard.
- Interview staff indicated that the process for conducting the initial screening is a checklist and a written format using a point system.
- Interview staff indicated that the staff does reassess inmate’s risk level as needed due to referrals, request, an incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness.
- Thirty (30) inmates were asked, when you first came to this facility, do you remember whether you were asked any questions like:
  - o Whether you been in jail or prison before, thirty (30) out of thirty (30) answer yes.
  - o Whether you have ever been sexually abused, twenty-nine (29) out of thirty (30) answer yes.
  - o Whether you identify with being gay, lesbian, or bisexual, twenty-nine (29) out of thirty answer yes.
  - o Whether you think you might be in danger of sexual abuse at this facility, Thirty (30) out of thirty (30) answer yes.

**Standard 115.42: Use of screening information**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.42 (a)**

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?  Yes  No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?  Yes  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate?  Yes  No

#### 115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?  Yes  No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?  Yes  No

#### 115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?  Yes  No

#### 115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  Yes  No

#### 115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  Yes  No

## 115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ Offender Assessment Screenings
- Screening for Risk of Victimization and Abusiveness
  - At Risk of Victimization
  - At Risk of Abusiveness
  - Review within 30 days
- Interviewer Comments
- Committee Review
- PREA Offender Reassessment Screening
- TDCJ # 03.01 Offender Assessment Screening
- TDCJ # 03.02 Special Population Processing and Review

- TDCJ #4:00 Offender Housing Assignments
- TDCJ #4.01 Offender Job Assignments
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager
  - o Staff Screening for Risk of Victimization and Abusiveness
  - o Random Inmates
  - o Inmates from LGBTI Populations

MTC Policy 903E-02, Ensuring Safe Prisons B.17, Use of Screening Information, (a), requires the Bridgeport CC 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.

The Bridgeport CC did not have any transgender or intersex inmates during the audit period. 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.

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.

Staff interviews also indicated if they were to have a transgender or intersex inmate, the inmate’s views concerning his safety would be given serious consideration.

Transgender and intersex inmates will be given the opportunity to shower separately from other inmates.

Interview with the Facility PREA Compliance Manager indicated that the facility would not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on identification status for protecting such inmates.

**Interview Results:**

- Interview with the Facility PREA Compliance Manager indicated that the facility would not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on identification status for protecting such inmates.
- Interviewed staff indicated that the facility is not subject to a consent decree, legal settlement, or legal judgment. Staff indicated that the facility ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely by their sexual orientation, genital status, or gender identity. They are housed in the general population unless requested by the inmate for special housing for safety issues.
- One (1) out of one (1) inmates identified as gay were interviewed stated that they were asking questions regarding their safety.

- One (1) out of one (1) inmates identified as gay were interviewed stated that they never been put in a housing area only for gay, lesbian, bisexual, transgender, or intersex inmates.

## Standard 115.43: Protective Custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization 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?  Yes  No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

#### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?  Yes  No

#### 115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  Yes  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?  Yes  No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  Yes  No

#### 115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC: Statement of Fact – Involuntary Segregated
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email A
- TDCJ # 1.00 Classification Committees
- Bridgeport CC Memo: Involuntary Segregated Housing for Risk of Sexual Victimization
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator

- Warden
- Facility PREA Compliance Manager
- Staff Supervise Inmates In Segregated Housing/PREA Related
- Inmates Placed in Segregated Housing/PREA Related

Interviews and documentation review at Bridgeport CC 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 are no available alternative means of separation from likely abusers. Interviews also revealed 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.

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.

If the Bridgeport CC signs 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 does not exceed 30 days.

If the facility places an inmate in involuntary segregated housing, the facility will document as required by this provision.

MTC Offender Data System (ODS) Generated Automated Email: Email A – from ODS notifying the facility PREA Manager that a new PREA Allegation has been assigned for investigation making sure assigned staff implement actions which ensure the involved offender (s) and/or staff protected from retaliation. Also, any use of involuntary segregated housing for the inmate who alleged suffering sexual abuse shall only be used after an assessment determines there is no available alternative means of separation from likely abusers. The reasons need to be documented within 24 hours of placement.

- a. Protect inmates and /or staff from retaliation for at least 90 days in accordance with standard 115.67 and MTC policy 903E.02.
- b. Document any use of involuntary segregated housing within 24 hours in accordance with standard 115.68, 115.43 and MTC policy 903E.02.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The 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 was zero.
- The number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero.
- From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include both (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged reported was zero.

**Interview Results:**

- The Warden, in an interview, stated the use of involuntary restricted housing would be a last resort, and if used, an assessment would be conducted documenting that less restrictive means were not available.

## REPORTING

### Standard 115.51: Inmate reporting

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  Yes  No

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?  Yes  No

#### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  Yes  No



## 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- Bridgeport CC Statement of Fact: Staff Verbal reports
- Bridgeport CC Staff Sexual Assault/Abuse Pocket Card
- Bridgeport CC Staff Sexual Assault/Abuse Red Flags Pocket Card
- Texas Legislature Zero-Tolerance (Spanish and English)
- TDCJ # ED-02.10 – Prison Rape Elimination Act Complaints and Inquires
- TDCJ # AD-16.20 – Reporting Incidents/Crimes to the Office of the Inspector General
- Immediate Reporting Guidelines
- Posters (English)
- Posters (Spanish)
- Reporting Guide for Conduct Prohibited by PD-22
- Sexual Abuse Investigation Checklist
- Staff on Offender Sexual Abuse Investigative Worksheet
- Staff on Offender Investigative Worksheet
- Warden's Investigative Review
- Offender Notification Brochure (English)
- Offender Notification Brochure (Spanish)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Inmates
  - o Random Inmates

Interviews with staff and documentation review indicated that the facility had established procedures allowing for multiple internal ways for inmates to report privately to Bridgeport CC and TDCJ officials regarding sexual abuse and sexual harassment, retaliation by other inmates or staff, to include staff neglect or violation of responsibilities that may contribute to PREA incidents. The following are internal reporting ways:

- Grievance System
- Tell the Case Manager
- Chaplain
- Reporting to any staff member either verbally or in writing
- Ombudsman Office (Third party reporting)
- OIG
- Writing an inmate request
- Hotline
- Writing an anonymous note

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:

- Ombudsman Office (Third party reporting)
- OIG
- Hotline

#### **Interview Results:**

- An interview with the Facility PREA Compliance Manager indicated that Bridgeport CC is tasked with the obligation to house adult male criminal 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.
- Ten (10) out of ten (10) interviewed staff indicated that they could privately report sexual abuse and sexual harassment of inmates to their supervisor or use the Hotline.
- Ten (10) out of ten (10) interviewed staff indicated that inmates can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment by using the Hotline, completing a grievance or telling a trusted staff. They also indicated that inmates could report verbally, in writing, anonymously, and from third parties.
- Interviewed inmates were asked, how would you report any sexual abuse or sexual harassment that happened to you or someone else? Twenty-eight (28) out of thirty (30) inmates stated several ways they would report, including telling a staff, using the hotline, passing a note, or filing a grievance.
- Interviewed inmates were asked can you make reports of sexual abuse or sexual harassment either in person or writing. Thirty (30) out of thirty (30) said yes, they can report using both methods.
- Interviewed inmates were asked is there someone who does not work at this facility that you could

report to about sexual abuse or sexual harassment. Twenty-nine (29) out of thirty (30) stated a family member.

- Interviewed inmates were asked have you ever told anyone who works here that you were sexually abused or sexually harassed while in this facility. Thirty (30) out of thirty (30) stated no.

## Standard 115.52: Exhaustion of administrative remedies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.  Yes  No  NA

#### 115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  Yes  No  NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may 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.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA

## 115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC State of Fact: PREA Investigation Extension (None)
- OGOM 1.03 Step 1 Emergency Grievances – Non PREA Allegation
- OGOM 1.04 PREA Allegations (Establish Procedures and Guidelines)
- Third Party Grievance Processing (Also see OGOM 9.00 Third Party Grievance Procedures)
- TDCJ # AD-03.82 – Management of Offender Grievances
- TDCJ Offender Grievance Procedure Issue Codes
- Emergency Complaint Checklist
- Safe Prisons/PREA Plan
- TDCJ #ED-02.03 – Ombudsman Program
- Texas Board of Criminal Justice Ombudsman
- TDCJ Disciplinary Manual
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Inmates Reported Sexual Abuse

Bridgeport CC has an administrative process to address inmate grievances. However, if an inmate uses the grievance process the grievance coordinator immediately submits the grievance to PREA investigations. Thus, ending the grievance process and starting the PREA investigation process.

The grievance process includes the following:

Time limits and informal grievances:

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.

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 case manager, the Grievance Officer or ask any staff members; they may mail it to the warden.
2. The grievance is not referred to a staff member who is involved in the allegation.

Filing Grievance:

1. Staff interviews indicated that if a resident 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 period does not include time consumed by residents in preparing any administrative appeal.
3. Bridgeport CC policy requires TDCJ 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.

Third Parties:

1. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist the inmate in filing requests for administrative remedies relating to allegations of sexual abuse, and also permitted to file requests on behalf of the inmate.
2. If a third party files 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.

Emergency Grievances:

1. The facility has established procedures for filing emergency grievances alleging that a resident is subject to a substantial risk of imminent sexual abuse.
2. According to interviews, when the facility receives an emergency grievance alleging a resident is at substantial risk of imminent sexual abuse, the staff immediately forwards the grievance for investigations.

Inmate's documentation indicated that the facility might discipline an inmate for filing a grievance related to alleged sexual abuse when the inmate filed the grievance in bad faith.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the number of grievances filed that alleged sexual abuse reported was 0.
- In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed reported was 0
- The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline reported was 0.
- The number of emergency grievances alleging substantial risk of imminent sexual abuse that was filed in the past 12 months reported was 0.
- The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions with five days reported was 0.
- In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith reported was 0.

## Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  Yes  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?  Yes  No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

### 115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  Yes  No

### 115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?  Yes  No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Memorandum of Understanding with Wise Hope Shelter and Crisis Center
- Safe Prisons/PREA Plan
- Wise Hope Shelter and Crisis Center Website
- Texas Association Against Sexual Assault (TAASA) Spanish and English
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jail
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Inmates
  - o Inmates Reported Sexual Abuse

The Bridgeport CC provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address to the Rape Crisis Center. An interview with the Facility PREA Compliance Manager indicated that the Bridgeport CC is a private contract facility tasked with the obligation to house adult male inmates.

The Bridgeport CC 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 by mandatory reporting laws. Inmates receive this information in their Admission and Orientation Booklet.



However, inmate interviews indicated concerns about not being able to report outside the facility confidentially on the phone without being recalled.

**Interview Results:**

- Twenty-four (24) out of thirty (30) inmates interviewed stated that they did not know if there are services available outside of the facility for dealing with sexual abuse if they needed it. However, the auditor did show the inmates the information was located in the handbook.
- Twenty-one (21) out of thirty inmates interviewed stated that they think the PREA hotline numbers are free to call.

**Standard 115.54: Third-party reporting**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.54 (a)**

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  Yes  No

**Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

**Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC State of Fact: PREA Investigation Extension (None)
- OGOM 1.03 Step 1 Emergency Grievances – Non PREA Allegation
- OGOM 1.04 PREA Allegations (Establish Procedures and Guidelines)
- Third Party Grievance Processing (Also see OGOM 9.00 Third Party Grievance Procedures)
- TDCJ # AD-03.82 – Management of Offender Grievances
- TDCJ # ED-02.10 – Prison Rape Elimination Act Complaints and Inquires

- Texas Board of Criminal Justice PREA Ombudsman Office
- PREA Ombudsman Inquiry Response Form
- TDCJ # AD-03.82 – Management of Offender Grievances
- MTC Web Page/Site
- Administrative Review & Risk Management Division (TDCJ Ombudsman Program)
- Safe Prisons/PREA Plan
- Texas Legislature Zero Tolerance
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews
  - o Warden
  - o Facility PREA Compliance Manager

Bridgeport CC 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.

Third party information is being provided to all visitors regarding their family members that are incarcerated at Bridgeport CC by an agency website. If at any time an inmate makes an allegation of being a victim of a sexual assault or sexual harassment and does not feel comfortable telling, writing, or using the posted hotline, the family member can make an official report of the inmate’s behalf by contracting assigned staff. All sexual abuse or sexual harassment reports are done discreetly to not compromise the offender.

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  Yes  No

### 115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  
 Yes  No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  Yes  No

### 115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  Yes  No

### 115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- Safe Prisons/PREA Plan
- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # AD-16.04 Administrative Directive – Forensic Evidence Collection
- TDCJ # AD-16.20 Administrative Directive – Reporting Incidents/Crimes to the Office of The Inspector General
- TDCJ # AD- 16.20 Attachments A: Immediate Reporting Guidelines
- TDCJ # G-57.1 Correctional Managed Health Care Policy Manual – Sexual Assault/Sexual Abuse
- TDCJ # 02.02 Safe Prisons/PREA Operations Manual – Offender Victim Representative
- Bridgeport CC Email: Requesting Mutual Agreement for Assistance 2017 Family Crisis Center
- Bridgeport CC: Unsigned MOU – Family Crisis Center
- Statement of Fact: Contacting the Wise Hope Shelter and Crisis Center
- Bridgeport CC Memo: Offender Victim Representative (OVR)

- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- Sexual Abuse Investigation Checklist
- TDCJ Emergency Action Center System
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers
  - o Medical Staff

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.

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.

When sexual abuse incidents occur at Bridgeport CC, staff interviews indicated that the facility would report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, initially to the facility’s designated investigators.

**Interview Results:**

- Ten (10) out of ten (10) interviewed staff indicated that the facility management required all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred at the facility; retaliation against inmates or staff who reported the incident, and any staff neglect or violation of responsibilities that may have contribute to an incident or retaliation.
- Interview with the Warden indicated that all allegations of sexual abuse and sexual harassment to include third party and anonymous sources are reported directly to the facility investigators and the Office of Investigations.
- Interviewed with the healthcare staff indicated that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning of the incident.

**Standard 115.62: Agency protection duties**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.62 (a)**

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

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### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ # 05.03 – Time Frames Associated with Offender Protection Investigations
- Bridgeport CC: Agency Protection Duties (Statement of Fact)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers

When Bridgeport CC 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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse reported was 0.

### Interview Results:

- Interview with the Warden indicated that when they learn that an inmate is subject to a substantial risk of imminent sexual abuse, the inmate maybe protected by moving to another housing unit or transferring the abuser.

## Standard 115.63: Reporting to other confinement facilities

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  Yes  No

#### 115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  Yes  No

#### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

#### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ # 04.01 – Reporting Allegations Of Sexual Abuse to Other Confinement Agencies
- Example of Letter Format
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager

Bridgeport CC has received an allegation that an inmate was sexually abused while confined at another facility. Per staff interviews, the facility notified the head of the facility or appropriate office of the agency where the alleged abuse occurred.

The facility provided a process that they used when an inmate alleged sexual assault or sexual harassment at another facility.

Staff interviews indicated that when receiving allegations reported from other facilities, they would complete an incident report and send for investigations.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was 0.
- During the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was 0.

**Interview Results:**

- Interview with the Warden indicated when and if the facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at their facility involving staff, they would put that staff on no-contact. If it involves an inmate, they will monitor that inmate until the investigation is completed.

**Standard 115.64: Staff first responder duties**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.64 (a)**

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?  
 Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No

## 115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- Sexual Assault/Abuse Pocket Card
- Sexual Abuse Investigation Checklist
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Random Officers
  - o Security Staff First Response
  - o Non-Security Staff First Response

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 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.

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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of allegations that an inmate was sexually abused was 2.



- Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was 0.
- In the past 12 months, the number of allegations where staff were notified within a period that still allowed for the collection of physical evidence was 0
- Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times non-security staff member was the first responder was 0.

## Standard 115.65: Coordinated response

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Operations Manual (Written Institution Plan)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Investigator
  - o Mental Health Staff
  - o Medical Staff
  - o Security Supervisor

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 were first responders, medical and mental health practitioners, investigators, and facility leadership.

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

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.66 (a)**

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

#### **115.66 (b)**

- Auditor is not required to audit this provision.

### **Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### **Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### **Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC Memo: Statement of Fact: Collectively Bargaining
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - PREA Coordinator
  - Facility Warden

Staff interviews and documentation indicated that Bridgeport CC current relationship with union or collective bargaining agreements do not limit Bridgeport CC ability to remove alleged staff sexual abusers from contract with inmates.

**Interview Results:**

- Interview with the Warden and Facility PREA Compliance Manager indicated that the Bridgeport CC do not belong to a union.

## Standard 115.67: Agency protection against retaliation

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  Yes  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

#### 115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for 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?  Yes  No

#### 115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment 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?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  Yes  No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?  Yes  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?  
 Yes  No

#### 115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?  
 Yes  No

#### 115.67 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

## Supporting Documents, Interviews and Observations:

- MTC Policy Ensuring Safe Prisons
- TDCJ # 05.08 – 90-Day Monitoring for Retaliation
- Safe Prisons/PREA Plan
- Offender 90-Day Monitoring Form
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email A
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Monitoring for Retaliation

Bridgeport CC 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 establish expected conduct. The facility PREA Compliance Manager is responsible for monitoring retaliation along with supervisor's to monitor inmates as it relates to PREA allegations and incidents.

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 PREA Compliance Manager who works in concert with the facility administrators and 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.

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.

MTC Offender Data System (ODS) Generated Automated Email: Email A – from ODS notifying the facility PREA Manager that a new PREA Allegation has been assigned for investigation making sure assigned staff implement actions which ensure the involved offender (s) and/or staff protected from retaliation. Also, any use of involuntary segregated housing for the inmate who alleged suffering sexual abuse shall only be used after an assessment determines there is no available alternative means of separation from likely abusers. The reasons need to be documented within 24 hours of placement.

- a. Protect inmates and /or staff from retaliation for at least 90 days in accordance with standard 115.67 and MTC policy 903E.02.
- b. Document any use of involuntary segregated housing within 24 hours in accordance with standard 115.68, 115.43 and MTC policy 903E.02.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of times an incident of retaliation occurred in the past 12 months was 0.

**Interview Results**

- Interviewed staff indicated that when preventing retaliation against inmates and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations would change inmate housing or transfers an inmate, removal of alleged abusers, refer inmate to counseling for services. When preventing retaliation against staff, they would change the staff shift or change the staff work details.
- Interviewed staff indicated that they would monitor the inmate at least weekly. However, this process would end around 90 days.

**Standard 115.68: Post-allegation protective custody**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.68 (a)**

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  Yes  No

**Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

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### **Supporting Documents, Interviews and Observation:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC Memo: State of Fact (No Inmate has been placed in Post-Allegation Protective Custody)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Staff Supervise Inmates In Segregated Housing

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 Bridgeport CC 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 are no available alternative means of separation from likely abusers. Interviews also revealed 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.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was 0.
- The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was 0.
- From a review of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include both a statement of the basis for facility's concern for the inmate's safety, and the reason or reasons why alternative means of separation could not be arranged was 0.

### **Interview Results**

- Interviewed staff indicated that there were no inmates during the audit period that was placed in segregation for protection from sexual abuse or after having alleged sexual abuse, however, staff did understand that if an inmate placed in segregation for protection they would ensure that the inmate received programs, privileges, and education and work opportunities.
- Interview with the Warden indicated that policy prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing instead of other housing areas unless an assessment has determined there are no available alternative means of separation from potential abusers. It was also indicated that inmates at high risk for sexual victimization or who have alleged sexual abuse placed in involuntary segregated housing only until an alternative means of separation from likely abusers could be arranged.
- Interview with the Warden indicated that the facility management team conducts sexual abuse incident review team meetings. The team includes upper-level management and allow for input from line supervisors, investigator, medical and counseling staff. The team considers all requirements listed in the standard.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  Yes  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?  Yes  No

#### 115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?  Yes  No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  Yes  No



#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  Yes  No

#### 115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?  Yes  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  Yes  No

#### 115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?  Yes  No

#### 115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?  Yes  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Bridgeport CC NIC Certificate of Completion
- Bridgeport CC Statement of Fact
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ #05.01 Attachment G – Sexual Abuse Investigation Checklist
- TDCJ # AD-16.20 – Reporting Incidents/Crimes to The Office of The Inspector General
- TDCJ # BP-01.07 – Inspector General Policy Statement
- TDCJ Attachment AD-16.20 Immediate Reporting Immediate Reporting
- TDCJ Attachment B - AD-16.20 Reporting Guide For Conduct Prohibited by PD-22
- TDCJ Staff-on-Offender Sexual Abuse Investigative Worksheet
- TDCJ Offender Statement
- TDCJ Summary of Facts and Findings
- TDCJ Warden's Investigative Review / Recommended Actions
- TDCJ Offender Notifications of Outcome
- TDCJ Offender Notification Brochure
- Bridgeport CC: Shift Rosters
- TDCJ Offender Protection Witness Statement/Report of Interview
- TDCJ Emergency Action Center System: Incident Report
- TDCJ # AD-16.03 – Evidence Handling
- Safe Prisons/PREA Plan
- Records Retention Schedule
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Investigator

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.

The Bridgeport CC uses investigators who have received special training in sexual abuse investigations. The Facility PREA Investigator and Agency Investigators have completed the NIC online training.

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.

When the OIG investigates sexual abuse, the Bridgeport CC cooperates with OIG investigators and endeavors to remain informed about the progress of the investigation.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit was 0.

#### **Interview Results:**

- Interviewed staff indicated that the outside agency that investigates criminal sexual abuse keeps the facility informed of the progress of the investigation thru emails and the release of the final investigation report.
- Interviewed investigator describe that direct and circumstantial evidence gather in an investigation of an incident of sexual abuse consisted of collecting physical and DNA evidence, electronic monitoring data, interviews, and prior complaints and reports of sexual abuse.
- Interviewed investigator indicated when discovers evidence that a prosecutable crime may have taken place; it is turned in to the OGI for review than the prosecutor is consulted. According to the investigator cases for prosecution is refer when there are substantiated allegations of conduct that appear to be criminal.
- Interviewed investigator indicated when a staff alleged to have committed sexual abuse terminates employment prior to a completed investigation into the conduct; the investigator continues the investigation until completion.
- Interviewed investigator indicated all investigations are documented. The documentation includes descriptions of physical, testimonial, and documentary evidence, as well as attached copies of documentary evidence.

## **Standard 115.72: Evidentiary standard for administrative investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.72 (a)**

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?  Yes  No

#### **Auditor Overall Compliance Determination**

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### **Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### **Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ #05.01 Attachments G – Sexual Abuse Investigation Checklist
- TDCJ # AD-16.20 – Reporting Incidents/Crimes to the Office of The Inspector General
- TDCJ # BP-01.07 – Inspector General Policy Statement
- TDCJ Attachment AD-16.20 Immediate Reporting Immediate Reporting
- TDCJ Attachment B - AD-16.20 Reporting Guide for Conduct Prohibited by PD-22
- TDCJ Staff-on-Offender Sexual Abuse Investigative Worksheet
- TDCJ Offender Statement
- TDCJ Summary of Facts and Findings
- TDCJ Warden's Investigative Review / Recommended Actions
- TDCJ Offender Notifications of Outcome
- TDCJ Offender Notification Brochure
- Bridgeport CC: Shift Rosters
- TDCJ Offender Protection Witness Statement/Report of Interview
- TDCJ Emergency Action Center System: Incident Report
- TDCJ # AD-16.03 – Evidence Handling
- Safe Prisons/PREA Plan
- Records Retention Schedule
- MTC Rules of Conduct
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Investigator

The investigators impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

### **Interview Results:**

- Interviews with the Facility Investigators confirmed the standard to determine whether an allegation is substantiated is the preponderance of the evidence.

## Standard 115.73: Reporting to inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  Yes  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  Yes  No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the

alleged abuser has been convicted on a charge related to sexual abuse within the facility?

Yes  No

### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No

### 115.73 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- TDCJ # 05.01 – Sexual Abuse Response and Investigation
- TDCJ Summary of Facts and Findings
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email B
  - MTC Offender Data System (ODS) Generated Automated Email C
  - MTC Offender Data System (ODS) Generated Automated Email E
- TDCJ Warden's Investigative Review / Recommended Actions
- TDCJ Offender Notifications of Outcome
- TDCJ Offender Notification Brochure
- Safe Prisons/PREA Plan
- TDCJ # 05.10 – Reporting Sexual Abuse Criminal Case Status to Offenders
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager

- o Inmates Reported Sexual Abuse

Policy 903.3.E.02 – Ensuring Safe Prisons, requires that following an investigation into an inmate’s allegation that he suffered sexual abuse in a Facility inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. In those cases in which the PREA Unit did not conduct the investigation, the relevant information will be requested from the investigative agency to inform the inmate. The facility obligation to an inmate terminates if the inmate is released from Department custody.

Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the facility will subsequently notify the inmate (unless the allegation has been determined to be unfounded or unsubstantiated) when 1) the staff member is no longer in the inmate’s housing unit; 2) the staff member is no longer employed at the facility; 3) the facility learns that the staff member has been arrested on a charge related to sexual abuse within the facility; or 4) the facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility. All notifications are documented. The facility’s obligation to report under this standard terminates if the alleged victim is released from the Department’s custody.

When Bridgeport CC notifies inmates, it uses the Notification of Outcome of Investigation letter as its documentation located on the Investigation paper work.

MTC Offender Data System (ODS) Generated Automated Emails: Email B – from ODS notifying the facility PREA Manager that a determination has been made on a PREA investigation and the specific action which is required:

- a. Reassess the inmate’s risk of victimization or abusiveness based upon information from the investigation. 114.41.
- b. For substantiated or unsubstantiated sexual abuse allegations, initiate a Sexual Abuse Incident Review within 30 days of determination. 115.86
- c. Inform the inmate and document the notification, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. 115.73

Email C – from ODS notifying the facility HR Manager that a determination has been made on a PREA investigation and the specific action which is required.

- d. Follow standards and policy related to disciplinary sanctions for staff as detailed below (115.76).
- e. Follow standards and policy related to hiring and promotion decisions as detailed below (115.17).
- f. Inform the inmate and document the notification, consistent with standards 115.73, unless the allegation, following an investigation, was unfounded. (This can be performed by the PREA Manager depending on facility direction).

Email E – from ODS notifying the PREA Manager to contact the investigative agency to obtain the results of the PREA case identified below. (115.73).

- g. Contact investigative agency and document status.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of criminal and administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months was 2.
- Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation was one 2.

### Interview Results

- Interview with Warden indicated that the facility notifies inmates who make an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.
- Interviewed Investigator indicated that an inmate who makes an allegation of sexual abuse must be informed as to the whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The information is shared with the facility to inform the inmate.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

#### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

#### 115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?  Yes  No

#### 115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No



- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?  Yes  No

### **Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### **Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### **Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- Bridgeport CC Request to Terminate Employee
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email C
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Investigator
  - o Human Resource Services

Policy 903.3.E.02 – Ensuring Safe Prisons, states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency inmate sexual abuse and harassment policies. The Directive indicates that termination is the presumptive disciplinary sanction for staff that has been found to have engaged in sexual abuse. All terminations for violations of agency inmate sexual abuse or harassment policies or resignations by staff who would have been terminated but for their resignation will be reported to law enforcement agencies unless the activity was not criminal and to any relevant licensing bodies.

Policy 903.3.E.02 – Ensuring Safe Prisons, identifies several offenses related to sexual abuse and inappropriate or undue familiarity with an inmate who is in the jurisdiction of the Department for which dismissal is normally the sanction.

MTC Offender Data System (ODS) Generated Automated Email: Email C – from ODS notifying the facility HR Manager that a determination has been made on a PREA investigation and the specific action which is required.

- a. Follow standards and policy related to disciplinary sanctions for staff as detailed below (115.76).
- b. Follow standards and policy related to hiring and promotion decisions as detailed below (115.17).
- c. Inform the inmate and document the notification, consistent with standards 115.73, unless the allegation, following an investigation, was unfounded. (This can be performed by the PREA Manager depending on facility direction).

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the number of staff from the facility who has violated agency sexual abuse or sexual harassment policies was 2.
- In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was 2.
- In the past 12 months, the number of staff from the facility which has been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies reported were 0.
- In the past 12 months, the number of staff from the facility that has been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment polices reported was 0.

#### Interview Results

- Interviews with the Warden’s Designee confirmed staff violating agency sexual abuse policies would be disciplined and that termination is the presumptive action and referral for prosecution where indicated.

### Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

## 115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ Volunteer Services Plan
- MTC Volunteers Receipt Statements
- Bridgeport CC Statement of Fact (None)
- TDCJ Letter: Criminal Justice Volunteer
- TDCJ Acknowledgement of Volunteer Training/Orientation
- TDCJ Volunteer Services Plan
- TDCJ Volunteer Training Facilitators Guide
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager

Policy 903.3.E.02 – Ensuring Safe Prisons, identifies sanctions for contractors, vendors, and volunteers who engage in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was not criminal and to relevant licensing bodies. The facility will take appropriate remedial measures and will consider whether to prohibit further contract with inmates, in the case of any other violation of agency inmate sexual abuse or sexual harassment policies by a contractor or volunteer.

Volunteers and contractors are advised during their orientation that any contractor of a volunteer who engages in sexual abuse shall be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was not criminal and to relevant licensing bodies. This information is provided in the Handbook provided to all contractors and volunteers.

There have been no violations of agency sexual abuse policies by any contractor or volunteer during the past twelve months.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates was 0.

## **Standard 115.78: Disciplinary sanctions for inmates**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.78 (a)**

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?  Yes  No

#### **115.78 (b)**

- Are sanctions 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?  Yes  No

#### **115.78 (c)**

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  Yes  No

#### **115.78 (d)**

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?  Yes  No

#### **115.78 (e)**

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?  Yes  No

#### **115.78 (f)**

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?  Yes  No

## 115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  
 Yes    No    NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Date System (ODS) Generated Automated Email D
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - o Warden
  - o Facility PREA Compliance Manager
  - o Medical Staff
  - o Mental Health Staff

The Bridgeport CC 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.

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.

In the Inmate Discipline Process 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.

Staff interviews indicated for 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.

MTC Offender Data System (ODS) Generated Automated Email: Email D – from ODS notifying the facility Disciplinary Hearing Officer that a determination has been made on a PREA investigation involving an inmate (s) and specific action is required.

- a. Follow standards and policy related to disciplinary sanctions for inmates as detailed below (115.78)

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility was 0.
- In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that has occurred at the facility was 0.

## MEDICAL AND MENTAL CARE

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

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

#### 115.81 (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, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  Yes  No  NA

### 115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

### 115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?  Yes  No

### 115.81 (e)

- Do medical and mental health practitioners 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?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ # G-57.1 – Correctional Managed Health Care Policy Manual
- TDCJ # H-61.1 – Confidentiality and Release of Protected Health Information
- TDCJ # I-70.1 – Informed Consent
- TDCJ Request /Consent for Treatment or Services
- TDCJ Referral To Medical / Mental Health Services
- Screening for Risk of Victimization and Abusiveness
  - At Risk of Victimization
  - At Risk of Abusiveness

- Review within 30 days
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews
  - Warden
  - Facility PREA Compliance Manager
  - Medical Staff
  - Inmates Disclosed Sexual Victimization
  - Staff Screening for Risk of Victimization and Abusiveness

MTC Policy 903.E.02 – Ensuring Safe Prisons, require inmates who disclosed they had experienced prior sexual victimization or prior perpetration of sexual abuse, whether it occurred in an institutional setting or the community, are to be offered a follow-up meeting with a medical or mental health practitioner within 14 days of the initial screening.

An inmate is known to have attempted to commit inmate-on-inmate sexual abuse or an inmate is known to have committed inmate-on-inmate sexual abuse is subject to a mental health evaluation by a qualified mental health professional. This evaluation will be attempted within 24 hours of the report of such sexual abuse or attempt and treatment will be offered as appropriate.

Information related to sexual victimization or abusiveness that occurred in an institutional setting will be strictly limited to medical and mental health practitioner and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State, or local law. Mental Health practitioners will 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. All mandatory reporting laws for allegations of sexual abuse must be followed.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the percent of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with the above-required services was 1.
- In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner was 0.

### **Interview Result**

- Interviews with medical staff indicated inmates reporting prior sexual victimization or prior perpetration would be seen by a mental health professional within 14 days of the initial screening.
- Interviewed inmates were asked when you told someone here that you were sexually abused, did he ask if you wanted to meet with a medical or mental health care practitioner, one out of one said yes.



## Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.82 (a)

- Do 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?  
 Yes  No

### 115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?  Yes  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

### 115.82 (c)

- Are inmate victims of sexual abuse 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?  Yes  No

### 115.82 (d)

- Are treatment services 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?  
 Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ # G-57.1 – Correctional Managed Health Care
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
  
- Interviews
  - o Warden
  - o Facility PREA Compliance Manager
  - o Medical Staff
  - o Inmates Reported Sexual Abuse

At the Bridgeport CC 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. Written consent is required before the exam, a collection of evidence or treatment can begin. The inmate is then transferred by MTC to the local Medical Center. Rape crisis volunteers are also available if needed.

Inmate victims of sexual abuse, while incarcerated, are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, by professionally accepted standards of care, where medically appropriate. The facility offers prophylactic treatment and follow-up for sexually transmitted and other communicable diseases to all victims, as appropriate.

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.

**Interview Results**

- Interviewed staff describes the following actions they would take as a first responder: Separate the alleged victim and abuser, Preserving and protecting evidence on the victim, abuser, and the location where the incident occurred.
- Interviewed staff indicated that they would ask the alleged victim and abuser not to take any actions that could destroy physical evidence; washing, brushing teeth, changing clothes, urinating, defecating, drinking, eating, etc.
- Interviewed staff indicated that they would immediately notify their supervisor.
- Interviewed Health Care staff indicated that inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services.
- Interviewed Health Care staff indicated that evaluation and treatment of inmates who have been victimized will receive follow-up services, treatment plans, and when necessary, referrals for continued care after leaving the facility.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  Yes  No

### 115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  Yes  No

### 115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

### 115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)  Yes  No  NA

### 115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)  Yes  No  NA

### 115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

### 115.83 (g)

- Are treatment services 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?  Yes  No

### 115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)  Yes  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jail
- Interviews
  - o Warden
  - o Facility PREA Compliance Manager
  - o Mental Health Staff
  - o Medical Staff
  - o Inmates Reported Sexual Abuse

The Bridgeport CC offers medical/mental health evaluation and, provides services to all inmates who have been victimized by sexual abuse.

Staff interviews indicated that evaluations and services of victims include follow-up services, referrals for continued care following inmates transfer to, or placement in, other facilities, or their release from custody.

The facility provides victims with medical/mental health services consistent with the community level of care.

Staff interviews indicated that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

MTC policy requires facility treatment services provided to victims without financial cost.

The facility conducts a medical/mental health evaluation of inmate-on-inmate abusers of learning of abuse history and offers treatment. If the inmate reports history of sexual abuse or abusiveness appears at risk for victimization, security and case management are notified.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?  Yes  No

#### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

#### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

#### 115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?  Yes  No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?  Yes  No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  Yes  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?  Yes  No

#### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Incident Report (System)
- Safe Prisons/PREA Plan
- TDCJ – Sexual Abuse Investigation Checklist
- TDCJ – Staff-on-Offender Sexual Abuse Investigative Worksheet
- TDCJ # AD-02.15 – Operating of the Emergency Action Center/ Reporting Procedures for Serious or Unusual Incidents
- Administrative Incident Reviews
- Reportable Serious or Unusual incidents
- EAC General Incident Report for Community Based Facilities
  
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email A
  - MTC Offender Data System (ODS) Generated Automated Email B
  - MTC Offender Data System (ODS) Generated Automated Email C
  - MTC Offender Date System (ODS) Generated Automated Email D
  - MTC Offender Data System (ODS) Generated Automated Email E
- PREA Ombudsman 2016 Report
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews
  - o Warden
  - o Facility PREA Compliance Manager
  - o Member from Incident Review Team

MTC Policy 903.E.02 – Ensuring Safe Prisons, review by the facility of Sexual Abuse Incidents, requires each facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the incident has been determined to be unfounded. The review will ordinarily occur within 30 days of the conclusions of the investigation when they received the Investigation Report. The review team will include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The review team is required to consider and complete the following:

- a. Whether the allegation or investigation indicates a need to change policy or practice to prevent better, detect or respond to sexual abuse;
- b. Whether the incident or allegation was motivated by race, ethnicity, gang affiliation, gender identity, status or perceived status as lesbian, gay, bisexual or intersex, or was motivated or caused by other group dynamics at the facility;
- c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- d. Assess the adequacy of staffing levels in that area during different shifts;
- e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

MTC Offender Data System (ODS) Generated Automated Email: Email B – from ODS notifying the facility PREA Manager that a determination has been made on a PREA investigation and the specific action which is required:

- d. Reassess the inmate’s risk of victimization or abusiveness based upon information from the investigation. 114.41.
- e. For substantiated or unsubstantiated sexual abuse allegations, initiate a Sexual Abuse incident Review within 30 days of determination. 115.86
- f. Inform the inmate and document the notification, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. 115.73

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the number of criminal and administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents was 2.

#### **Interview Result**

- Interviews with staff confirmed they are aware of the process and were able to articulate how they would conduct a review. Staff indicated the following are minimally the staff on the incident review team: Warden; Deputy Warden, PREA Compliance Manager, Counseling, Medical and additional staff pointed by the Warden. This team meets to review any incident, including any PREA related incidents.
- Interviewed staff indicated that they consider whether the incident or allegation was motivated by all the requirements listed in the standard, and was there is monitoring technology it is reviewed as a part of the review.

## Standard 115.87: Data collection

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  Yes  No

#### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

#### 115.87 (c)

- Does the incident-based data 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?  Yes  No

#### 115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  Yes  No

#### 115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  Yes  No  NA

#### 115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### **Supporting Documents, Interviews, and Observations**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ # 07.01 – Visual Tracking Grid
- MTC 2016 PREA Report
  - MTC Offender Data System
  - Demographics of MTC Operated Facilities
  - Summary of Facility Reports for 2016
  - Agency Progress Assessment
  - MTC Offender Data System (ODS) Generated Automated Email A
  - MTC Offender Data System (ODS) Generated Automated Email B
  - MTC Offender Data System (ODS) Generated Automated Email C
  - MTC Offender Date System (ODS) Generated Automated Email D
  - MTC Offender Data System (ODS) Generated Automated Email E
- TDCJ Ombudsman Resolution Report 2016
- PREA Ombudsman 2016 Report
- MTC Corporate and Facility Locations (Website)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- - Interviews
  - MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - Warden
  - Facility PREA Compliance Manager
  - Member from Incident Review Team
  - Investigator

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, Master Investigation Log by Site and others.

The reviewed 2016 MTC Annual Report was comprehensive and detailed and included Demographics of MTC Operated Facilities as well as detailed PREA Data. In 2016 MTC started using their Offender Data System (ODS). The system provides a platform which captures all data required for responses to the Survey of Sexual Victimization (SSV). In addition, incident reviews required by the PREA standards, are now able to be put into the system for review by management. Efforts have been made to provide additional structure within the Offender Data System by triggering automated email distribution following entries into the ODC PREA system.

The purpose of the five emails (which include the specific PREA standards being attached to each email for reference/education and duties to be followed) are listed in the following paragraphs:

MTC Offender Data System (ODS) Generated Automated Emails:

Email A – from ODS notifying the facility PREA Manager that a new PREA Allegation has been assigned for investigation making sure assigned staff implement actions which ensure the involved offender (s) and/or staff protected from retaliation. Also, any use of involuntary segregated housing for the inmate who alleged suffering sexual abuse shall only be used after an assessment determines there is no available alternative means of separation from likely abusers. The reasons need to be documented within 24 hours of placement.

- Protect inmates and /or staff from retaliation for at least 90 days in accordance with standard 115.67 and MTC policy 903E.02.
- Document any use of involuntary segregated housing within 24 hours in accordance with standard 115.68, 115.43 and MTC policy 903E.02.

Email B – from ODS notifying the facility PREA Manager that a determination has been made on a PREA investigation and the specific action which is required:

- Reassess the inmate's risk of victimization or abusiveness based upon information from the investigation. 114.41.
- For substantiated or unsubstantiated sexual abuse allegations, initiate a Sexual Abuse incident Review within 30 days of determination. 115.86
- Inform the inmate and document the notification, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. 115.73

Email C – from ODS notifying the facility HR Manager that a determination has been made on a PREA investigation and the specific action which is required.

- Follow standards and policy related to disciplinary sanctions for staff as detailed below (115.76).
- Follow standards and policy related to hiring and promotion decisions as detailed below (115.17).
- Inform the inmate and document the notification, consistent with standards 115.73, unless the allegation, following an investigation, was unfounded. (This can be performed by the PREA Manager depending on facility direction).

Email D – from ODS notifying the facility Disciplinary Hearing Officer that a determination has been made on a PREA investigation involving an inmate (s) and specific action is required.

- Follow standards and policy related to disciplinary sanctions for inmates as detailed below (115.78)

Email E – from ODS notifying the PREA Manager to contact the investigative agency to obtain the results of the PREA case identified below. (115.73).

- Contact investigative agency and document status.

The agency aggregated incident-based sexual abuse data at least annually.

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.

The agency maintains, reviews, and collects data as needed from all available incident- based documents, including reports, investigation files, and sexual abuse incident reviews.

The agency also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

Upon request, the agency will provide all such data from the previous calendar year to the Department of Justice no later than June 30.

## **Standard 115.88: Data review for corrective action**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.88 (a)**

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?  Yes  No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?  Yes  No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?  Yes  No

#### **115.88 (b)**

- Does the agency's annual report include 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  Yes  No

#### **115.88 (c)**

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?  Yes  No

## 115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- TDCJ # 07.01 – Visual Tracking Grid
- MTC 2016 PREA Report
  - MTC Offender Data System
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  - MTC Offender Date System (ODS) Generated Automated Email D
  - MTC Offender Data System (ODS) Generated Automated Email E
- TDCJ Ombudsman Resolution Report 2016
- PREA Ombudsman 2016 Report
- MTC Corporate and Facility Locations (Website)
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- - Interviews
  - o MTC Director of Policy & Audits/Agency Assistant PREA Coordinator
  - o Warden
  - o Facility PREA Compliance Manager

The MTC and the Bridgeport CC review data collected and aggregated under § 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 Bridgeport CC and the agency.

The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

The report is approved by the MTC agency head and made readily available to the public through its website.

The MTC redact specific material from the reports that would present a clear and specific threat to the safety and security of a facility.

**Interview Results:**

- Interview staff indicated that the facility annual report of finding for its data review and any corrective actions is a part of the agency annual report.

**Standard 115.89: Data storage, publication, and destruction**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.89 (a)**

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

**115.89 (b)**

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  Yes  No

**115.89 (c)**

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

**115.89 (d)**

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  Yes  No

**Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

- Does Not Meet Standard** (Requires Corrective Action)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

#### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- Records Retention Schedule
- PREA Audit: Pre-Audit Questionnaire / Adult Prison & Jails
- Interviews:
  - Agency PREA Coordinator
  - Facility PREA Compliance Manager

MTC the parent company aggregated sexual abuse data from the Bridgeport CC 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

The agency maintains sexual abuse data collected for at least ten years after the date of initial collection.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.)  
 Yes  No  NA

##### 115.401 (b)

- During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited?  Yes  No

#### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  
 Yes  No

#### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

#### 115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  
 Yes  No

#### 115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Supporting Documents, Interviews and Observations:

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- MTC 2016 Annual PREA Report
- Interviews:
  - o Agency PREA Coordinator
  - o Assistant Agency PREA Coordinator

**Interview Results:**

Interview with MTC has indicated that the agency has conducted the required PREA Audits every year. The agency has ensured that at least one-third of each type is audited.

**Standard 115.403: Audit contents and findings**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.403 (f)**

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility’s last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)  Yes  No  NA

**Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

**Supporting Documents, Interviews and Observations:**

- MTC Policy 903.E.02 – Ensuring Safe Prisons
- Safe Prisons/PREA Plan
- MTC 2016 Annual PREA Report
- Interviews:
  - o Agency PREA Coordinator
  - o Assistant Agency PREA Coordinator



**Interview Results:**

Interview with MTC and a review of the agency website indicated that the agency has made publicly available all PREA audits as required by standard.

<b>AUDITOR CERTIFICATION</b>
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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.

**Auditor Instructions:**

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.<sup>1</sup> Auditors are not permitted to submit audit reports that have been scanned.<sup>2</sup> See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Adam T. Barnett, Sr. May 17, 2018

**Auditor Signature**

**Date**

<sup>1</sup> See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

<sup>2</sup> See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.