

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: May 04, 2017

Auditor Information			
Auditor name: Henry Reyes			
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Telephone number: 210-422-2857 (210-370-2318 no longer in use)			
Date of facility visit: October 17 – 21, 2016			
Facility Information			
Facility name: Travis County Jail (TCJ)			
Facility physical address: 500 W. 10 th Street Austin, Texas 78701			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: 512-854-9770			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Major Wes Priddy			
Number of staff assigned to the facility in the last 12 months: 1223			
Designed facility capacity: 361			
Current population of facility: 348			
Facility security levels/inmate custody levels: Max, Med, Min, Medical & Mental Health			
Age range of the population: 17 & up – Adult and Youthful Offenders			
Name of PREA Compliance Manager: Sergeant Mark Foster		Title: Sergeant	
Email address: mark.foster@traviscountytexas.gov		Telephone number: 316-660-3928	
Agency Information			
Name of agency: Travis County Sheriff's Office			
Governing authority or parent agency: <i>(if applicable)</i> Click here to enter text.			
Physical address: 5555 Airport Blvd. Austin, Texas 78751			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: 512-854-9770			
Agency Chief Executive Officer			
Name: Greg Hamilton		Title: Sheriff	
Email address: greg.hamilton@traviscountytexas.gov		Telephone number: 512-854-9770	
Agency-Wide PREA Coordinator			
Name: Lieutenant Bucky Eacret		Title: Lieutenant – PREA Coordinator	
Email address: Lloyd.eacret@travis		Telephone number: 512-854-5391	

AUDIT FINDINGS

NARRATIVE

The site visit for the Prison Rape Elimination Act (PREA) audit of the Travis County Sheriff's Office (TCSO) consisted of inspection of the Travis County Jail (TCJ) and Travis County Correctional Complex (TCCC). This report is for the site visit of TCJ. The entire audit process was conducted from October 17 – 21, 2016. Monica Lugo and Henry Reyes were the two Certified PREA Auditors who conducted this audit. During the site visit they toured the entire facility and conducted multiple interviews with staff and inmates. A total of 23 random inmate interviews in both English and Spanish were conducted at TCJ along with 10 random staff interviews.

An introduction meeting was held on October 17, 2016, with Lieutenant Lloyd "Bucky" Eacret, PREA Coordinator, Sergeant Tracy Shumard, TCCC PREA Compliance Manager, and Sergeant Mark Foster, TCJ PREA Compliance Manager.

Following the introduction meeting, interviews were conducted with specialized staff. Once these interviews concluded a complete tour of the facility was conducted. Sergeants Tracy Shumard and Mark Foster facilitated the TCJ tour, allowing us access to all areas of the facility. There were 348 inmates assigned to the detention facility at the time of the audit. This population includes those inmates being held in Central Booking of the facility. The design capacity of the TCJ is 194 and the attached Central Booking Facility (CBF) is 167. The facility houses both men and women including youthful inmates; at the time of the audit there were 28 youthful offenders. The agency employs 1,223 employees that are available to be assigned between TCJ and TCC; there were 241 officers assigned to TCJ.

During this audit the following areas were toured:

1. Intake/reception/screening area;
2. Housing units;
3. Segregated housing units;
4. Health care areas (medical and mental health clinics, infirmary, and housing units);
5. Recreation areas, kitchen, work areas, and other programming areas;
6. Youthful offender housing units.

While touring the facility both auditors carefully observed how well the inmates were supervised, identified blind spots, and how cameras and monitoring technology was utilized in a way to keep inmates safe from sexual abuse. The security of monitoring equipment and office areas used to house such equipment were also inspected. Additionally, staff in the areas toured were asked multiple questions by the auditors to assess if the practices at the facility were conducted in accordance with the PREA standards and agency policy. All interviews were conducted in as private a place as possible, so as to allow staff to answer honestly and speak freely.

The audit process continued with additional interviews of staff and inmates. Auditors requested a listing of all inmates housed at the TCJ Detention Facility and randomly selected at least one inmate from each housing unit. There were additional inmates selected to include disabled or limited English proficient; transgender, intersex, gay, lesbian, and bisexual; in segregated housing for risk of sexual victimization; reported a sexual abuse; or had disclosed sexual victimization during intake risk assessment. Shift rosters were also requested and auditors randomly selected staff from all shifts.

DESCRIPTION OF FACILITY CHARACTERISTICS

The TCJ complex encompasses one full block of down town Austin, Texas between 10th & 11th streets and Guadalupe & Nueces streets. The first and oldest building is the Heaman/Sweat Historic County Court House.; This building is used for hearing civil cases and contains the County Clerks Office & Law Library. The main entrance to this building faces Guadalupe St. In 1986, the Travis County Jail (TCJ) was opened to house 286 pre-trial detainees. The main entrance to TCJ faces the plaza directly behind Heaman/Sweat Court House.

In April of 2001, the Blackwell-Thurman Criminal Justice Center opened adjacent to the Travis County Jail. It contains a direct supervision booking facility utilized by all of Travis County. Central booking also contains an office for Austin Municipal Court. The sally-port entrance is off of 10th St., at the corner of Nueces.

As part of the Criminal Justice Center, the tower also houses the criminal courts, probation offices, the District Attorney's Office, Pre-trial services, Court Administration and Central Command Security.

The Travis County Sheriff's Office Central Command Security maintains the security of all Travis County court buildings. This section is tasked with screening all persons entering the facility, while also maintaining perimeter security, monitoring building alarms and security cameras.

The Travis County Sheriff's Office Transportation section is responsible for inmate movement to and from court. Transportation also handles extraditions, persons arrested on Travis County warrants in other counties, and court arrests. (Source: Agency website)

The facility currently employs 295 people who may have contact with inmates. There are currently 653 volunteers and individual contractors who may have contact with inmates. The agency employs 16 investigators to investigate allegations of sexual abuse.

The Travis County Sheriff's Office mission statement states in partnership with the citizens of Travis County, is to provide effective public service to all individuals in an impartial, ethical and professional manner.

The agency provides its core values in its policies and the agency website. They consist of:

- **Service**- to prepare, provide and work for and with others in a timely, courteous and professional manner.
- **Honesty** - to be truthful and forthright in our thoughts, words and deeds.
- **Embrace Diversity** - using our differences to enhance our service to and with the community by respecting each individual.
- **Respect** - recognizing the value of each person and treating them with decency and dignity.
- **Integrity** - having the courage to do the right thing for the right reasons, even when it is unpopular or unpleasant.
- **Full Accountability** - being responsive and responsible for our actions.
- **Firm Commitment** - steadfast resolve and dedication to succeed.

The Travis County Sheriff's Office lists its Code of Ethics as follows: "As a Travis County Sheriff's Officer, my fundamental duty is to safeguard lives and property; to protect the innocent against deception, the weak against oppression or intimidation, and the peaceful against violence or disorder; and to respect the Constitutional rights of all persons to liberty, equality and justice.

I will keep my private life unsullied as an example to all; maintain courageous calm in the face of danger, scorn, or ridicule; develop self-restraint; and be constantly mindful of the welfare of others. Honest in thought and deed in both my personal and official life, I will be exemplary in obeying the laws of the land and the regulations of the Office. Whatever I see or hear of a confidential nature, or what is confided in me in my official capacity, will be kept ever secret unless revelation is necessary in the performance of duty.

I will not act officiously or permit personal feelings, prejudices, animosities or friendships to influence my decisions. With no compromise, I will enforce the law courteously and appropriately without fear or favor, malice or ill will, never employing unnecessary force or violence, and never accepting gratuities.

I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of my calling. I will constantly strive to achieve these objectives and ideals, dedicating myself before God to my chosen profession."

SUMMARY OF AUDIT FINDINGS

An exit meeting was held on October 21, 2016, with Sheriff Greg Hamilton, Major Wes Priddy, and Lieutenant Lloyd “Bucky” Eacret, PREA Coordinator, Sergeant Mark Foster, PREA Compliance Manager, and Sergeant Tracy Shumard, PREA Compliance Manager. Also present were Major Michael Gottner, Captain Anthony Aranda, Captain Juan Sandoval, Captain Lisa Brown, Captain Sally Pena, Captain Shane Poole, Medical Director Kathryn Geiger, Inmate Services Director Danny Smith.

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Number of standards not applicable: 1

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

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

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

The TCJ Detention Facility has written policy TCSO 3.5.9 mandating zero tolerance towards all forms of sexual abuse and sexual harassment. The policy outlines the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment.

The agency employs an upper level, agency-wide PREA Coordinator with rank of Lieutenant who has sufficient time and authority to develop, implement, enforce and oversee agency efforts to comply with the PREA standards in all of its facilities. The PREA Coordinator, Lieutenant Lloyd "Bucky" Eacret reports to an Major Wes Priddy. This is in the agency's organizational chart which was provided.

The agency has designated a TCJ PREA Compliance Manager with rank of a Sergeant, Sergeant Mark Foster, who did not have sufficient time to coordinate the facility's efforts to comply with the PREA standards. This was determined after an interview with Sergeant Foster and an examination of work assigned. The agency immediately addressed this deficiency after it was brought to their attention, by assigning a new Compliance Manager who had more time and knowledge of the department and PREA, and the authority to fulfill the duties of Compliance Manager. The PREA Compliance Manager reports directly to the PREA Coordinator. This is outlined in the provided organizational chart.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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The agency currently has 1 contract for the confinement of inmates with Limestone County; however, they do not have inmates currently housed at the contracted facility. The contract is set up for overflow and emergency housing only. This contract has been amended to include that each contractor will adopt and comply with the PREA standards and allow the agency to monitor compliance. The amended contract requires the agency to work to comply with the PREA standards and was signed on August 30, 2016. Copies of the contract were provided.

In reference to standard 115.12 (b), there were no new contracts entered into by TCSO and other facilities

Standard 115.13 Supervision and monitoring

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

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The TCJ Detention Facility has developed, documented, and made its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing, and , where applicable, video monitoring to protect inmates against abuse. A document titled “Staffing Plan” outlines the chain of command, organizational chart, and the 11 factors that must be considered in calculating adequate staffing levels and determining needs for video monitoring equipment. The document also contains requests for funding to supplement the existing video monitoring system. Additionally, a detailed outline of locations for camera installation was provided.

The TCJ Detention Facility monitors for compliance with staffing plan daily, to ensure compliance with a 1:48 officer to inmate ratio as required by the Texas Commission on Jail Standards and the average daily inmate population; this was validated during interviews with Sheriff Hamilton, Major Priddy, Lieutenant Eacret, Sergeant Foster, and Sergeant Shumard. The agency indicated that there has not been any incident in which the staffing plan was not complied with. In circumstances where the staffing plan is not complied with, the facility will document and justify all deviations from the plan. Interviews with specialized staff and documentation of daily rosters support this standard. Additionally, any staff shortages were addressed through the use of an overtime process that guarantees manpower needs are met on a daily basis. Major Priddy also confirmed that daily checks are conducted with on duty commanders to ensure staffing requirements are being met.

The TCJ Detention Facility completes an annual staffing review, in consultation with the PREA Coordinator, to assess, determine, and document whether adjustments are needed to staffing plan as indicated in the staffing plan.

The TCJ Detention policy TCSO 3.1.2 supports the standard of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy also prohibits staff from alerting other staff members that rounds are occurring. While on-site the auditors monitored and reviewed documentation to support this standard. The TCSO added an “elog” system that tracks exact types of rounds and documents unannounced rounds with “Rank on post for unannounced round – PREA”, which was provided and visually assessed while onsite.

Standard 115.14 Youthful inmates

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

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

The TCJ Detention Center Facility does not place youthful inmates in a housing unit where they will have contact with adult inmates through the use of a shared dayroom, common space, shower area, or sleeping quarters. At the time of the on-site audit no youthful inmates were housed in the facility with adult offenders. The auditors did inspect the unit where the youthful inmates are housed. Policy TCSO 4.2.1, visual inspection of the housing areas 3N (males) and 2C (females), and interviews with numerous inmates and staff members confirmed compliance with this practice. A classification standard operating procedure (SOP) was provided with further outlines the requirement to house youthful offenders in accordance with this standard and document accordingly.

The TCJ Detention Center Facility provides direct staff supervision when the agency is unable to maintain sight and sound separation between youthful inmates and adult inmates. During interviews with program staff who work with youthful inmates they stated a Deputy stays in the area in the event youthful inmates attend programs or recreation with adult offenders. In March 2016, the Travis County Sheriff's Office relocated all youthful offenders to the TCJ Detention Center from the Travis County Correctional Complex (TCCC) to further ensure compliance with this standard.

The TCJ County Detention Facility makes its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Youthful inmates are afforded equal access to large-muscle exercise, education services, and other programs. A visit and inspection of their special housing areas confirmed no youthful offenders were housed with adult offenders in these areas. It was further validated during random interview with youthful offenders, medical, and security personnel. Prohibition is also outlined in the classification SOP provided.

Standard 115.15 Limits to cross-gender viewing and searches

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

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

The TCJ Detention Facility does not conduct cross-gender pat-down searches, cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances and with the approval of Lieutenant or above. This is outlined in TCSO 3.1.12. In the event a cross-gender pat-down search of females, cross-gender strip search or cross-gender visual body cavity search is conducted it must be documented.

The TCJ Detention Facility has policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical 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. While on site auditors

identified cameras in suicide cells, medical cells, court holding cells, and in some booking cells. There were no problems noted with the viewing areas of the cameras. Policy TCSO 3.1.2 requires staff of the opposite gender to announce their presence before entering an inmate housing unit. Auditors observed announcements being made during on-site audit and interviews with inmates and staff confirmed practice is regularly done.

The TCJ Detention Facility does not 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, it is determined 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. Policy TCSO 3.1.12 supports this standard. Additionally, a "Transgender Operating Procedure" was provided which outlines the definitions of LGBTQI, a gender review team, intake/holding/screening process, medical review, mental health involvement, and classification procedures.

Travis County Sheriff's Office trains security staff on how to conduct cross-gender pat down searches, searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Staff interviews, training curricula and training records indicated staff had been trained.

The agency further reported, via the preaudit questionnaire, that there were no incidents involving cross gender strip or body cavity searches in the last 12-months.

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

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

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

Policy TCSO 3.5.9 supports this standard ensuring inmates with disabilities; including those who are deaf or hard of hearing, blind or have low vision, or who have intellectual, psychiatric or speech disabilities, have equal opportunities to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The agency ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities. The agency has interpreters on contract when services are needed. This is further outlined in their Communication Barrier SOP. Receipt of PREA information by non-English speaking inmates was validated during the interview process by Henry Reyes who is bilingual. Sheriff Hamilton further verified the efforts taken by the TCSO to provide this information to those individuals described above. Finally, the agency provided a complete list of 157 bilingual staff members.

Policy TCSO 3.1.4 prohibits use of 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. It was reported by the agency that there were no instances in which an inmate interpreter/reader was needed.

Standard 115.17 Hiring and promotion decisions

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

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The TCJ County Sheriff's Office does not hire or promote anyone who may have contact with inmates who have engaged in the prohibited conducted outlined in standard 115.17(a), and does not enlist the services of any contractor who may have had contact with inmates, who has engaged in sexual abuse in any criminal justice facility; 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 has been civilly or administratively adjudicated to have engaged in the activity described above. Policy TCSO 3.5.9 supports this standard.

TCSO background investigations require the Human Resources section to conduct thorough investigations of all applicants before a hiring decision is made. The investigation process includes an applicant questionnaire and oral interview with applicants. Additionally, a pre-employment application packet must be submitted and applicants must successfully pass a polygraph examination. This process is outlined in TCSO Policy 1.3.10. The agency reported 89 new staff members were hired in the last 12-months; 100% had a criminal background check conducted. They also reported that 22 contractors were screened with a background check.

Validations of the practices listed in the policies provided and PREA requirements were executed by examination of random personnel files, interviews with the Human Resource Administrator, and Sheriff Hamilton.

Standard 115.18 Upgrades to facilities and technologies

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

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The TCJ Detention Facility has not made any new modification or expansions to the existing facility. An annual update to the camera system is conducted and information on this was provided during the staffing analysis review. This was validated during interviews with Sheriff Hamilton and Major Priddy and visual inspection of the video monitoring system.

Standard 115.21 Evidence protocol and forensic medical examinations

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

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TCJ Detention Facility is responsible for investigating allegations of sexual abuse, the Travis County Sheriff's Office follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is developmentally appropriate for youth. Policy TCSO 3.5.9 supports this standard along with the Physical Evidence Handbook and information from the training curriculum and SafePlace memorandum.

The TCJ Detention Facility offers all victims of sexual abuse access to forensic medical examinations, without financial cost, where evidentiarily or medically appropriate. Such examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). These exams take place at hospitals.

The facility makes available to the victim a victim advocate from a rape crisis center. If requested by the victim, a victim advocate will accompany and support the victim through the forensic medical examination process, investigatory interviews, and provides emotional support, crisis intervention, information, and referrals. TCSO has a memorandum with SafePlace and has established the TCSO Victim Services. Inmates interviewed demonstrated knowledge of available services. The Inmate Handbook further outlines a list and contact information for available resources (pp. 7).

The TCSO reported that 1 forensic medical exam was conducted within the last 12-months and submitted to the Department of Public Safety (DPS); they were awaiting results at the time of the audit.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

Travis County Sheriff's Office ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Policy 3.5.9 ensures that allegations of sexual abuse or sexual harassment are referred for investigations to an agency with the legal authority to conduct criminal investigations,

unless the allegation does not involve potentially criminal behavior. Policy regarding the referral of allegations is published on the agency's website. In the past 12 months, the facility received 159 allegations of sexual abuse and sexual harassment. All allegations were referred for further investigation to their internal investigations division, 158 resulted in administrative investigations and 1 were referred for criminal investigation.

Case files were reviewed and interviews were conducted with both criminal and administrative investigators to ensure understanding and compliance with the standard and established policies.

Standard 115.31 Employee training

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

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Travis County Sheriff's Office trains all employees who may have contact with inmates on all components of this standard. The agency provides annual refresher PREA training to staff and updated information in between via posters, PREA newsletters (The Scoop), annual In-Service training and policy updates. Training provided to staff is documented through employee signature, that the staff member received and understood the training provided. Auditors reviewed training curriculum and training acknowledgment forms. During interviews with Human Resource staff, random line staff, and supervisory staff it was clear that the training is being provided and is understood. Staff further indicated that PREA training is provided during the basic training academy and annual In-Service training. A PowerPoint presentation utilized and lesson plan to deliver this training was provided by the agency and reviewed by auditors.

Posters related to PREA reporting and the TCSO's zero tolerance policy were posted throughout the facility in both English and Spanish in areas visible to inmates.

Standard 115.32 Volunteer and contractor training

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

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Travis County Sheriff's Office ensures 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. The level and type of training provided are based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of the agency's zero tolerance policy regarding sexual abuse/harassment and informed how to report such incidents. The agency maintains documentation confirming training was received and understood. The agency reported 419 volunteers and individual contractors, who have contact with inmates have received this training. Interviews and review of training curriculum and acknowledgment forms supported this standard.

The Volunteer Coordinator, Beverly Gentle, is responsible for delivering this information at a mandatory orientation training. The written training and volunteer documentation was provided for inspection by the auditors.

Standard 115.33 Inmate education

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

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During the intake process, inmates receive PREA information about the agency's zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. Information is provided through a PREA Intake Brochure, PREA video, and Inmate Handbook. The video plays every hour and the volume was acceptable; the closed captions were also on. There were 16,655 inmates admitted to the facility at the time of report in the last 12-months, 100% received this information through a brochure and video. Auditors reviewed the brochure, observed intake process during site visit, and conducted random inmate interviews supporting this standard.

In addition to providing such education, the TCJ Detention Facility ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats in both English and Spanish. Auditors reviewed inmate handbook, inmate brochure and conducted random interviews of staff and inmates to support this standard.

Inmate PREA education is available in accessible formats for all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Policy TCSO 3.5.9 and contract for services supports this standard. Additionally, a Communications Barrier SOP was provided for inspection.

The TCJ Detention Facility maintains documentation of inmate participation in PREA education by having each inmate sign an acknowledgment form. Documentation was reviewed by auditors and a sample of the acknowledgment was also provided for inspection.

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

- Does Not Meet Standard (requires corrective action)

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Travis County Sheriff's Office has 44 investigators who are available to respond to the Detention Facility. These investigators are trained in conducting sexual abuse investigations in confinement settings. Agency policy TCSO 3.5.9 covers training elements and the requirement to ensure documentation is maintained. Interviews with investigators and documents were reviewed to support this standard. All supervisors have completed departmental training on investigations in a confinement setting; investigators have completed the National Institute of Correction's (NIC) PREA Investigating Sexual Abuse in a Confinement Setting training. A list of all staff members who completed the training was provided and they demonstrated 100% compliance. Additional staff who were not mandated to complete the course were also listed on the document.

Standard 115.35 Specialized training: Medical and mental health care

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

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

The TCJ Detention Facility Policy 3.5.9, relating to contractors supports the elements of this standard requiring training of medical and mental health practitioners who work regularly in its facilities. There are 60 medical and mental health practitioners who work regularly at this facility, 100% have received training required by policy. Training included NIC PREA Healthcare for Sexual Assault Victims in a Confinement Setting and the PREA Behavioral Healthcare for Sexual Assault Victims in a Confinement Setting. Certificates reflecting successful completion of training was on file and inspected during audit. Medical staff do not conduct forensic medical exams in this facility. Review of policy, documents and interviews with medical and mental health staff supports this standard.

Standard 115.41 Screening for risk of victimization and abusiveness

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Policy TCSO 4.1.1 requires objective screening upon admission to a facility or transfer to another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates. Policy also requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. The facility reported there were 14,899 inmates who entered the facility who were screened in accordance with policy and had a length of stay of 72-hours or more.

The TCJ Detention Center uses an objective screening instrument.

The intake screening considers, 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;
- (2) The age of the inmate;
- (3) The physical build of the inmate;
- (4) Whether the inmate has previously been incarcerated;
- (5) Whether the inmate's criminal history is exclusively nonviolent;
- (6) Whether the inmate has prior convictions for sex offenses against an adult or child;
- (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (8) Whether the inmate has previously experienced sexual victimization;
- (9) The inmate's own perception of vulnerability; and
- (10) Whether the inmate is detained solely for civil immigration purposes.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to TCSO, in assessing inmates for risk of being sexually abusive.

Policies TCSO 3.5.9 and 4.2.1, along with the classification SOP, require that the facility reassesses each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30-days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. A total of 5,947 reassessments were reported for the last 12-months.

Policies TCSO 3.5.9 and 4.1.1, and classification SOP prohibit disciplining inmates for refusing to answer, or for not disclosing complete information related to questions asked.

Auditors reviewed policies, screening instrument, reviews and reassessments, and interviewed classification staff in addition to random staff and inmates to support this standard; a demonstration on the use of the form was also provided during the audit. Screening forms are password protected and prompts are available for screening staff that highlight certain characteristics that require immediate notification to classification.

Standard 115.42 Use of screening information

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Policy TCSO 3.5.9 and 4.2.1 and classification SOP, and risk instrument addresses how information is collected and used to ensure the safety of the inmates when assigning them in housing and programs. Transgender and intersex inmate's own views are given serious consideration during housing and program placement. Transgender and intersex inmates are allowed to shower separately. This was documented during staff and inmate interview. Information is also password protected on the computer to ensure only authorized personnel have access. The process is further outlined in the Transgender and Intersex SOP which were reviewed to ensure compliance with this standard.

Classification files were reviewed along with aforementioned policies and SOPs. Information provided by transgendered inmates confirmed that information regarding their housing assignment was solicited from them during the intake process.

Standard 115.43 Protective custody

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

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

Policy TCSO 3.4.1 prohibits the placement of 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. It was reported by the agency that there were no incidents which required an inmate to be housed in involuntary segregation.

The Transgender and Intersex SOP provides a specific provision which permits inmates the opportunity to shower separately from other inmates. Adherence to this practice was confirmed during inmate and staff interviews.

Inmates placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If the TCJ Detention Facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: the opportunities that have been limited; the duration of the limitation; and reasons for such limitations. The facility reported no inmates at risk for sexual victimization where assigned to involuntary segregation. Interviews with staff and inmates supported policy and practice to support this standard.

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

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

The TCJ Detention Facility provides multiple internal ways for inmates to report privately sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates have access to a PREA and SafePlace hotline when access to dayroom is permitted. Policy TCSO 3.5.9, inmate handbook (pp. 4-9) and interviews with staff and inmates supports this standard.

Policy TCSO 3.5.9 mandate staff to accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are to immediately reports made verbally. Staff and inmate interviews along with incident documents reviewed by auditors supports this standard.

Policy TCSO 3.5.9 provides procedures for staff to privately report sexual abuse and sexual harassment of inmates through means outlined in the Inmate Handbook (pp. 7-8). Staff are informed of these procedures through policy, the Inmate Handbook, agency website, and training. Staff interviews and training documents supported this standard.

Standard 115.52 Exhaustion of administrative remedies

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

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

Policies TCSO 3.5.6 and 3.5.9 outlines the agency's administrative procedures for dealing with inmate grievances regarding sexual abuse. The Inmate Handbook (pp. 6) contains further information available to inmates on the PREA Grievance procedures.

The TCJ Detention Facility does not impose a time limit on when an inmate may submit a grievance regarding and allegations of sexual abuse. The facility does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

The agency policy and procedure allow an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint through use of the grievance system, third party reporting mechanisms (i.e. SafePlace), inmate kiosks, or through the hotline. Documentation reviewed during site visit and inmate interviews support this standard. Additionally, all phones in the living units were tested for operability. A glitch in the phone system was discovered when Auditor Monica Lugo attempted to contact SafePlace using the inmate phone system. She was not able to make contact. TCSO staff was immediately notified and the system was reset, restoring it to full operability as verified by Monica Lugo with a second call to SafePlace. A random inmate

was asked to log into the kiosk system and demonstrate his ability to utilize the reporting mechanism. He did so without any problems.

Policy TCSO 3.5.6 requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. Facility reported 3 grievances, alleging sexual abuse, where filed during the last 12-month period and all were issued a final decision within 90 days. Grievance documents were reviewed that supported the policy and this standard along with staff and inmate interviews.

Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and are also permitted to file such requests on behalf of inmates. This information is provided in the inmate handbook (pp. 7-8) and the agency website: www.tcssheriff.org/inmate-jail-info/prea.

Policy TCSO 3.5.6 outlines procedures for the filing of an emergency grievances when an inmate is subject to a substantial risk of imminent sexual abuse. Policy also requires and initial response within 48 hours for these emergency grievances. Facility reported no emergency grievances were filed alleging substantial risk of imminent sexual abuse within the last 12-months. Documents were reviewed during site visit to ensure compliance with this standard.

Policy TCSO 3.5.9 and 3.5.6 allows the TCJ County Detention Facility to discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith. This information is further communicated to staff and inmates in the Inmate Handbook (pp. 8). No disciplinary incidents for bad faith filing of a PREA complaint were reported within the last 12-months.

Standard 115.53 Inmate access to outside confidential support services

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

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

Travis County Sheriff's Office has an MOU in place with SafePlace, who provides victim advocacy services. The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by: giving inmates mailing addresses and telephone numbers for local, state, or national victim advocacy or rape crisis organizations, giving inmates mailing addresses and telephone numbers for immigrant services agencies for persons detained solely for civil immigration purposes, and enabling reasonable communication between inmates and these organizations in as confidential a manner as possible. This information is provided in the Inmate Handbook (pp. 7,9).

The facility informs inmates, before giving them access to outside support services, the extent to which such communications will be monitored through the Inmate Handbook and other written documents (i.e. posters). The facility informs inmates, before giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law. Policy 3.5.9, review of

contract and interviews support this standard. This information is also contained in the agency's Coordinated Response Plan. The agency also provided a full list of the agency's immigrant services agencies which were validated through inmate and staff interviews.

Standard 115.54 Third-party reporting

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

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

Travis County Sheriff's Office provides several methods to submit third-party reports of inmate sexual abuse or sexual harassment. The agency also distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. This information is posted and accessible on the agencies website www.tcsheiff.org/inmate-jail-info/prea. A copy of the third party reporting form was provided to onsite auditors for review. The Inmate Handbook further addresses the means available for third party reporting (pp. 7-8).

Standard 115.61 Staff and agency reporting duties

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

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

Travis County Sheriff's Office requires all staff to immediately report, according to agency policy TCSO 3.5.9: any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; any retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This was verified through random staff and inmate interviews.

Apart from reporting to designated supervisors or officials and designated state or local service agencies, agency policy TCSO 3.5.9 prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Travis County Sheriff's Office reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. Interviews conducted with random staff and inmates supports this standard. The agency also provides information to the public through its website for third party reports to be

submitted.

- Completing a PREA reporting form available at visitation
- Submitting an online PREA reporting form www.tcssheriff.info/prea

Standard 115.62 Agency protection duties

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

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

When a TCSO employee learns that an inmate is subject to a substantial risk of imminent sexual abuse, they are required to take immediate action to protect the inmate. Policy TCSO 3.5.9 requires all staff to immediately report any knowledge, suspicion, or information they receive regarding an inmate being at risk for victimization. Interviews with random staff, specialized staff, and review of incident reports supports this standard. Staff indicated that an inmate who made a report to them would be immediately moved to a safe location and notification to a supervisor would immediately follow.

Standard 115.63 Reporting to other confinement facilities

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

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

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the TCJ Detention Facility notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred. The facility received 1 allegation that an inmate was abused while at another facility. The documentation provided supports notification was provided as soon as possible, but no later than 72 hours after receiving the allegation. The related policy was updated to require notification to the other agency is made by Facility Administrator, Major Wes Priddy, instead of the PREA Coordinator.

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)

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

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

Upon receiving an allegation that an inmate has been sexually abused, the first security staff member to respond shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to properly collect evidence from the victim and alleged abuser; and if the abuse occurred within a time period that still allows for the collection of physical evidence, 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. Agency policy 3.5.9 and the Coordinated Response Plan support this standard. The auditors conducted interviews with randomly selected staff and questioned security staff as the tour of the facility was being conducted. Staff demonstrated knowledge of first responder requirements and immediate action required.

If the first staff responder is not a security staff member, the responder requests that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The agency reported a total of 59 incidents within the last 12-months; 55 were responded to by security staff and 4 were reported anonymously. Of the 59 incidents reported, 6 were reported within a time frame that allowed for collection of physical evidence in the last 12-month period. Of the 6 sent for collection of physical evidence, 5 were unfounded using video evidence and 1 was referred for a sexual assault forensic exam (SAFE).

Standard 115.65 Coordinated response

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

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

The Travis County Sheriff's Office has developed a written PREA Coordinated Response Plan to jointly and uniformly to an incident of sexual abuse. The plan is utilized by staff first responders, medical and mental health practitioners, investigators, and facility leadership. The Coordinate Response Plan is outlined in policy TCSO 3.5.9; however, the response plan provides more specific courses of action depending on the type of allegation. The Coordinated Response Plan, related policy, and interviews with specialized staff support this standard.

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

- Exceeds Standard (substantially exceeds requirement of standard)

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

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

N/A

The Travis County Sheriff’s Office does not participate in collective bargaining according to interview with Sheriff Hamilton, Major Priddy, and Lieutenant Eacret.

Standard 115.67 Agency protection against retaliation

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

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

Policy TCSO 3.5.9 protects 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, and designated PREA Coordinator with monitoring retaliation. Monitoring for relation against inmates, by classification, will be for at least 90 days unless the initial monitoring indicated a need to continue. Monitoring for retaliation against staff is conducted by the PREA Coordinator for at least 90 days.

The TCJ Detention Facility has 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. Interviews with staff and inmates support this standard.

Standard 115.68 Post-allegation protective custody

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

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

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

Policy TCSO 3.4.1 prohibits the placement of inmates who allege to have suffered sexual abuse 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. No inmate has been placed in involuntary segregation within the last 12-months. An interview with Major Wes Priddy and Lieutenant Eacret reflected that classification staff and agency leadership would explore all available options before resorting to segregative housing.

Standard 115.71 Criminal and administrative agency investigations

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

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

Travis County Sheriff's Office has 44 trained investigators available to investigate sexual abuse and sexual harassment allegations. Policy 3.5.9 contains areas related to criminal and administrative agency investigations. Substantiated allegations of conduct that appear to be criminal are referred for prosecution. Agency reported no substantiated allegations of conduct that appeared to be criminal that were referred for prosecution since August 20, 2012. There is, however, 1 case pending evidence from the state that is under investigation. Allegations were reviewed by auditors and reports indicated the agency follows agency policy and standard requirements. Investigators were also interviewed, which reflected agency policy and standard requirements.

Standard 115.72 Evidentiary standard for administrative investigations

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

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

Travis County Sheriff's Office imposes no higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated. Policy TCSO 3.5.9 supports this standard. Investigative staff interviewed confirmed that the standard used was the preponderance of evidence.

Standard 115.73 Reporting to inmates

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

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

Policy TCSO 3.5.9, the Coordinated Response Plan, and the Coordinated Response Plan flow chart require that any inmate who makes an allegation that they have suffered sexual abuse in its facilities, be informed verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. A sample of the notification sent to inmates was provided; a review of the document was also conducted during the onsite audit.

In the last 12-month periods, the agency reported 50 criminal and administrative investigations of alleged inmate sexual abuse were completed. A total of 12 inmates were notified of investigation's outcome; 38 incidents were investigated however, inmates were released before notification could be made. Interview with investigations staff indicated that even after release, the Travis County Sheriff's Office attempts to make contact with the alleged victim using information available to them.

Standard 115.76 Disciplinary sanctions for staff

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

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

Travis County Sheriff's Office staff is subject to disciplinary sanctions, up to and including termination, for violating agency sexual abuse or sexual harassment policies. Policy TCSO 3.5.9 outlines the sanctions for staff that can be administered. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. During interviews with staff, they did understand the potential disciplinary sanctions for engaging in prohibited conduct. There have been not substantiated allegations of facility staff involved in sexual abuse reported in the past 12- months.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. Travis County Sheriff's Office reported that no staff from the facility had been disciplined for

violation of agency sexual abuse and sexual harassment policies.

Standard 115.77 Corrective action for contractors and volunteers

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

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

Policy TCSO 3.5.9 requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies. The policy also requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. During this reporting period there were no incidences of contractors or volunteers being reported to law enforcement for said conduct.

TCJ Detention Facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse/harassment policies by a contractor or volunteer. Random interviews with volunteers and contractors supported their understanding of potential administrative and criminal action if a violation of policies/laws occurred.

Standard 115.78 Disciplinary sanctions for inmates

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

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

TCJ Detention Facility inmates are subject to disciplinary sanctions only under a formal disciplinary process 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. Based on the information provided by the facility there were 6 administrative findings of inmate-on-inmate sexual abuse and no criminal finding of guilt for inmate-on-inmate sexual abuse. All incidents were abuse by contact. Auditors reviewed policy 3.5.9 and documentation of findings. Findings were also validated during investigative and administrative interviews and interview with Major Priddy. The Inmate Handbook (pp. 8, 18-20) provides information to inmates and staff on the sanctions that can be imposed for engaging in sexual violence and to staff in policy TCSO 3.3.1.

Sanctions are 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. This process

takes into consideration whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

TCJ Detention Facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse with the consideration of whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Interviews with medical and mental health staff supported this standard.

The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact as outlined in the Inmate Handbook (pp. 8). The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. Auditors reviewed documentation of inmate discipline for inappropriate behavior toward staff.

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

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

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

Policy TCSO 4.1.1 provides all inmates with a medical and mental health screening who disclose a history of sexual victimization. If the screening indicates an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 72 hours of the intake screening, but will not exceed 7 days. While onsite, medical and mental health staff walked auditors through the entire screening processes and provided a demonstration of the system used. Documentation review indicated that 100% of all inmates who disclosed prior victimization were offered follow up meetings with a medical or mental health practitioner.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners 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.

Medical and mental health practitioners obtain informed consent, form outlined in policy TCSO 3.5.9, from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Copy of release form was provided to auditors. During interviews with medical and mental health administrators, they verified this process. Applicable inmate interviews also verified the steps outlined in the policy were being adhered to.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)

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

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

The TCJ Detention Facility provides inmate victims of sexual abuse with 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. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health practitioners. Travis County Sheriff's Office has developed a Coordinated Response Plan with medical and mental health sections that outline these procedures. During interviews with medical and mental health staff, they confirmed their knowledge of this process. Only medical and mental health staff have access to the data bases that maintains documentation of treatment provided to inmates.

Inmate victims of sexual abuse while incarcerated are offered timely information about timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically 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. This is outlined in the Coordinated Response Plan. Information is made further available to inmates and staff in the Inmate Handbook (pp. 9).

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

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

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

The TCJ Detention Facility offers 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.

The evaluation and treatment of such victims include, as appropriate, follow-up service, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The TCJ Detention Facility provides victims with medical and mental health services consistent with the community level of care.

Female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from the sexual abuse while incarcerated, victims receive timely and comprehensive information about, and

timely access to, all lawful pregnancy-related medical services.

Inmate victims of sexual abuse while incarcerated are offered test for sexually transmitted infections as medically appropriate. Treatment services are provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The Coordinate Response Plan, medical and mental health contracts, and interviews support this standard. Information to inmates for follow up with agencies after release is also provided in the Inmate Handbook.

Standard 115.86 Sexual abuse incident reviews

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

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

The TCJ Detention Facility conducts 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. There were 13 criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents in the past 10-months. The review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Policy 3.5.9 and the Coordinated Response Plan’s leadership section support this standard. This procedure was initiated January 2016 and all documentation reviewed was from that date forward.

The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the TCJ Detention Facility. The review team examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may have enabled abuse; assess adequate staffing levels; and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Auditors reviewed documents of completed incident reviews during site visit. Additionally, interviews with Sheriff Hamilton, Major Priddy, Lieutenant Eacret, Sergeant Foster, Sergeant Shumard, investigators, and medical and mental health administrators further verified adherence to this standard.

Standard 115.87 Data collection

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

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

Travis County Sheriff's Office collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually. Policy TCSO 3.5.9 supports this standard. The incident-based data collected is based on the most recent versions of the Survey of Sexual Violence conducted by the Department of Justice.

Travis County Sheriff's Office maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The auditors reviewed data collected and action taken by agency to improve the safety of the inmates.

Travis County Sheriff's Office provides all such data from the previous calendar year to the Department of Justice no later than June 30. Copy of applicable policies were reviewed by auditors. The agency's FY14, 15, and 16 annual reports, available on their website and submitted to auditors for review, contain the statistics outlined in the Survey of Sexual Violence (SSV).

Standard 115.88 Data review for corrective action

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

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

Travis County Sheriff's Office reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. Annual reports for FY14, 15, and 16 were provided for review and are also available on the agency's website.

Annual reports include a comparison of the current year's data and corrective actions with those from prior years and will provide an assessment of the agency's progress in addressing sexual abuse.

Travis County Sheriff's Office report was approved by Sheriff Hamilton and is made readily available to the public through its website. Additionally, this was verified through interviews with Sheriff Hamilton, Major Priddy, and Lieutenant Eacret.

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)

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

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

Travis County Sheriff's Office makes all aggregated sexual abuse data, from facilities under its direct control readily available to the public at least annually through its website. Prior to making data publicly available, the agency removes all personal identifiers. Policy TCSO 3.5.9 supports this standard.

All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. This was further verified during an interview with Lieutenant Eacret.

AUDITOR CERTIFICATION

I certify that:

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

/Signed/ Henry Reyes

May 11, 2017

Auditor Signature

Date